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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	TOWNHOMES COND	OMINIUM ASSOCIATION, INC.
DOCUMENT NUMBER: N940000	01827	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Aaron Blynn		
	(Name of Contact Person	n)
	(Firm/ Company)	
3135 Gifford Lane # 0		
	(Address)	
Miami FL 33133		
	(City/ State and Zip Code	e)
ablynn@gjb-lav	W.COM ed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Philippe Guiol	at (305	215-5998
(Name of Contact Person)	(Area Code & Daytime Telephone Num	
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu	& \$\sumsymbol{1}\$\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address
Amendment Section Division of Corporations		
P.O. Box 6327		Building
		Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GROVE WALK TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Flow N9400001827	rida Dept. of State)		
(Document Number of Co	rporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the f	following	
a. If amending name, enter the new name of the corporation	on:		
		The new	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." of	r "Inc."	
D. Enter now mining of the state of the stat			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	<u></u>		,
		<u></u>	20
D. If amounting the registered agent and to resistant of the	- Aldrew in File and Aldrew Cal	문	35 76
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office and a second agent and/or the new registered office and a second agent agent and a second agent agent and a second agent		C	71 2
Name of New Registered Agent:		9	~ <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>
Hume of New Registered Agent.		PH 11: 4	, d
	(Florida street address)		ָט י
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	+1	1 2
	, Florida		
(City)	(Zip Code)	ı	
New Registered Agent's Signature, if changing Registered	Agent:		
hereby accept the appointment as registered agent. I am fan			
Signature of New I	Registered Agent, if changing		

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mil</u>	n Doe te Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	Manuel Gurdian	3135 Gifford Lane Unit B Miami FL 33133
2) Change Add	<u>T</u>	Philippe Guiol	3135 Gifford Lane Unit B Miami FL 33133
Remove 3) Change Add Remove	<u>T</u>	Fabio Nieto	3135 Gifford Lane Unit C Miami FL 33133
4) Change X Add Remove	<u>P</u>	Aaron Blynn	3135 Gifford Lane Unit C Miami FL 33133
5) Change Add Remove			
6) Change Add Remove			

ttach additional sheets, if necessary). (Be specifie)				
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date this document was signed.	adoption:	, if other than the
•	1/1/2013	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) \checkmark oval.	
There are no members or me adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated 11/1/	/2013	
Signature_		
have not 1	airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)	
Philippe	Guiol	
	(Typed or printed name of person signing)	
Treasure	er	
	(Title of person signing)	