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COVER LETTER

TO: Amendment Section

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Division of Corporations

BOCA PRESERVE NAME OF CORPORATION:	HOMEOWNERS /	ASSOCIATION,	INC.
N95000003692 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
JAMES GRAY			
	(Name of Contact	Person)	
BOCA PRESERVE HOMEOWNERS ASSOCIATIO	N, INC.		
	(Firm/ Compar		
7180 NW TURTLE WALK			
	(Address)		
BOCA RATON, FL 33487			
	(City/ State and Zip	o Code)	
BOCAPRESERVE@GMAIL.COM			
E-mail address: (to be used	for future annual re	eport notification)
For further information concerning this matter, please	call:		
JAMES GRAY	а	954 at	410-7153
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida	Department of S	itate:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certifi is Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)
<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C 2	treet Address Amendment Section Division of Corpo Tifton Building 661 Executive C Callahassee, FL 3.	rations enter Circle

Articles of Amendment to Articles of Incorporation of

BOCA PRESERVE HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N9500003692

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006. Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc," "Company" or "Co." may not be used in the name.

B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

		—
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	e.	;
		5
If amending the registered agent and/or registered office address in Florida, endew registered agent and/or the new registered office address:	nter the name of the	
Name of New Registered Agent:	·	

New Registered Office Address:

(Florida street address)

_____, Florida ______ (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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:

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

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John I.</u> V <u>Mike J</u> SV <u>Sally S</u>	lones	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>v</u>	JANINE HAMILTON	7180 NW TURTLE WALK
Add			BOCA RATON, FL 33487
X Remove			
2) Change	D	FERNANDO GARCIA	7180 NW TURTLE WALK
X Add			BOCA RATON. FL 33487
Remove			
3) X Change	VT	RICHARD VIGILANTE	7180 NW TURTLE WALK
Add			BOCA RATON, FL 33487
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

E.	Hamending or adding additional Art	icles, enter change(s) here:
	(attach additional sheets, if necessary).	(Be specific)

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Page 3 of 4

	1/19/19 date of each amendment(s) adoption: if this document was signed.	other than the
	tive date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis ament's effective date on the Department of State's records.	ted as the
Adu	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 7/16/19	
	Signature Lame Wilking	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator $-$ if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	JAMIE WILKINS	
(Typed or printed name of person signing)		
	SECRETARY	

. . . .

(Title of person signing)