N96000001584

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
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5/2300

TO: Amendment Section Division of Corporations

M NAME OF CORPORATION:	ARINA VILLAGE	TOWNHOUSE AS	SOC., INC.		
N9600	0001584		·		
DOCUMENT NUMBER:					
The enclosed Articles of Amendme	nt and fee are subm	itted for filing.			
Please return all correspondence co	ncerning this matter	to the following:			
ARTHUR CARLAN					
	(Name of Contact Pe	rson)		
CARLAN TAX & ACCOUNTING	SERVICES LLC				
		(Firm/ Company)		
2815 KILKIERANE DRIVE					
		(Address)			
TALLAHASSEE, FL 32309					
	(City/ State and Zip (Code)		
arthur@carlantax.com					
E-mail a	ddress: (to be used t	or future annual rep	ort notificatio	n)	
For further information concerning	this matter, please c	all:			
Arthur Carlan		at	850	566-6447	
(Name	of Contact Person)		(Area Code)	(Daytime Teleph	none Number)
Enclosed is a check for the following	g amount made pay	able to the Florida E	epartment of	State:	
	3.75 Filing Fee & Crificate of Status	3\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certi Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Address		St.	ant Address		

Mailing Address
Amendment Section Division of Corporations + P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARINA VILLAGE TOWNHOUSE ASSOC., INC.

(Name of Corporation	as curre	ntly filed with the Flori	da Dept. of State)	
N96000001584				
(Docum	nent Numl	ber of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statut	es, this Florida Not For	Profit Corporation adopts the following	
A. If amending name, enter the new name of the	e corporat	tion:		
N/A			The nev	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ution" or "incorporated		
B. Enter new principal office address, if applicable:		N/A		
) _{N/A}		
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A	<u>BOX</u>)	N/A	0.10 6.00 AC.	
		N/A	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		N/A		
O. If amending the registered agent and/or registered new registered agent and/or the new register			enter the name of the	
new registered agent and/or the new register	N/A	auut ess.		
Name of New Registered Agent:			·····	
	N/A			
New Registered Office Address:		(Florida street address)		
New Negisiered Office Address.	N/A		N/A	
		(0):	, Florida (Zip Code)	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing Foundation hereby accept the appointment as registered agent			the obligations of the position.	
-		Signature of New Registe	and Agant if changing	

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>Mi</u>	nn <u>Doc</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	. <u>Addres</u> s
1) Change	V	OLK, TOM	3333 W. PENSACOLA STREET
Add			STE 330
X Remove			TALLAHASSEE, FL 32304
2) Change	Т	FUDULOFF, MIKE	6451 OX BOW COURT
Add			TALLAHASSEE, FL 32312
X Remove	S	HERRING, BARBARA	601 N. ST.AUGUSTINE ROAD
3) Change			VALDOSTA, GA 31601
Add X Remove			
4) Change	V	FARRELL, BILL	402 LIVE OAK LANE WEST
X Add			HAVANA, FL 32333
Remove			
5) Change	T	COLLINS, WILLIAM	14460 DUPONT AVENUE
X Add			PORT CHARLOTTE, FL 33953
Remove			
6) Change	<u>s</u>	HACKELTON, WILLIAM	2031 HERB COURT
X Add			TALLAHASSEE, FL 32312
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
N/A		·				
						
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5/7/16	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
N/A Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes east for the arwas/were sufficient for approval.	mendment(s)
\square There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were
Dated 4-16-2016	
Signature William & Klubus	
(By the chairman or vice chairman of the board, president or other officer- have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
WILLIAM OWENS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	