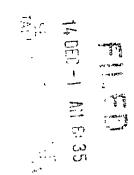
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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations			
NAME OF CORPORATION:	ODS HOMEOWN	ERS' ASSOCIATION, IN	NC.
DOCUMENT NUMBER: N9700005	700		
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		The second of th
KRISTY MOUNT			
	(Name of Contact Person	n)	
JOHN H. EVANS, P.A.			بي الم
	(Firm/ Company)		<u> </u>
1702 S. WASHINGTON	AVENUE		
	(Address)		
TITUSVILLE FL 32780		•	
	(City/ State and Zip Code	2)	
eugene.apicella@			
E-mail address: (to be used	for future annual report	notification)	
For further information concerning this matter, please	call:		
KRISTY MOUNT	_{at} 321	, 267-5504	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number	er)
Enclosed is a check for the following amount made page	yable to the Florida Depa	rtment of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation

CYPRESS WOODS HOMEOWNERS' ASSOCIATION, INC.

•	Articles	to s of Incorporation of	The same of the sa
CYPRESS WOODS HO	MEOWNER	RS' ASSOCIATION, INC.	
(Name of Corporation as current	y filed with the Flo	orida Dept. of State)	
N97000005700		·	The state of the s
(Doc	ment Number of Co	orporation (if known)	, O.
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporat		es, this Florida Not For Profit Corporation adopts the following	55
A. If amending name, enter the new na	me of the corporati	ion:	
name must be distinguishable and contain "Company" or "Co." may not be used in		The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principa I office address, i	f applicable:	1702 S. WASHINGTON AVE.	
(Principal office address <u>MUST BE A ST</u>		TITUSVILLE, FL 32780	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. BOX 10165	
		COCOA, FL 32927	
D. If amending the registered agent an new registered agent and/or the new		ce address in Florida, enter the name of the	
Name of New Registered Agent:	JOHN H. E	VANS	
		ASHINGTON AVE.	
New Registered Office Address:		(Florida street address)	
	TITUSVILL	.E, Florida 32780	
•	(City)	(Zip Code)	
New Registered Agent's Signature, if ch	anging Registered	Agent:	
f hereby accept the appointment as registe	ered agent. I am fai	miliar 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 = 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 <u>Doe</u> ke Jones ly Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	in G
1) Change	Р	MICHAEL SMITH	P.O. BOX 1	0165
X Add			COCOA, F	32927
Remove				
2) Change	V	ZACHARY SPIRES	P.O. BOX 1	0165
X			COCOA, F	L 32927
Remove 3) K Change	TS	EUGENE APICELLA	P.O. BOX 1	0165
Add			COCOA, F	L 32927
Remove				
4) Change	D	ANNE STUART	P.O. BOX 1	0165
X Add			COCOA, F	L 32927
Remove				
5) Change	D	KANDICE KAUFMAN	P.O. BOX	10165
X Add			COCOA, F	L 32927
Remove				
6) Change	Р	GARY STANLEY		
Add		,	VI	
X Remove				

E. If amending or adding additional A (attach additional sheets, if necessary,	rticles, enter change(s) ho	ere:		和 意	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
REMOVE: VP STEVE	WARNER			5	The state of the s
REMOVE: D RUSSE	LL WHITE			•	
REMOVE: D DEBOR	AH KUESTER			<u> </u>	्त <u>्</u>
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The	e date of each amendment(s) adoption: NOVEMBER 19, 2014 e this document was signed.	, if other than the
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ON E</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast 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	
	Signature Linea H. Aperella	
	(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)	,
	EUGENE APICELLA	T T
	(Typed or printed name of person signing)	معنه وسن
	TREASURER AND SECRETARY	
	(Title of person signing)	للعصفة المسيد المعاددة المسيد
		Q.