(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
- (City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nai	me)
(Docu	ment Number)	)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	
		i

Office Use Only



900275163449

07/27/15--01003--022 \*\*35.00



Anund

JUL 28 2015

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATIO	The Preserve at Ham	nock Creek Homeo	wners Associat	ion, Inc.
	N99000002825			
DOCUMENT NUMBER: _				
The enclosed Articles of Amo	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
Christopher Wadsworth				
		Name of Contact Po	erson)	
Signature Property Managen	nent, LLC			
		(Firm/ Company	у)	
738 Colorado Avenue				
		(Address)		·
Stuart, FL 34994				
	(	City/ State and Zip	Code)	
stephanie@signatureproperty	ymgmt.com			
E-	mail address: (to be used	for future annual rep	ort notification	n)
For further information conce	erning this matter, please o	all:		
Chris Wadsworth		at	772	219-4474
(	Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & [ Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Malling A	J.J	54		

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



The Preserve at Hammock Creek Homeowners Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N99000002825 (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: 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. 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address:

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

\_, Florida \_

(Zip Code)

(City)

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	D	Gerret Swearingen	2655 SW Bear Paw Trail
Add			Palm City, FL 34990
Remove			
2) Change	S, T	Mary Ann Fiduccia	2855 SW Bear Paw Trail
X Add			Palm City, FL 34990
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	ts, if necessary).	(ве ѕресіліс)				
					<u>.</u>	
			· · · · · · · · · · · · · · · · · · ·			<del></del>
			. <u> </u>			
·						
			_ <del></del>			
		<del>.</del>				
			<del></del>			
				<u>.                                      </u>		

The	, if other than the	
date	e this document was signed.	
	25'June 201'5	
EH	cective date if applicable:  (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date with the date on the Department of State's records.	Il not be listed as the
Ada	option of Amendment(s) (CHECK ONE)	
	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 25 June 2015	
	Signature Mary Amo Liduria	
	(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)	
	Mary Anne Fiduccia (Typed or printed name of person signing)	
	Socretary / Treasurer (Title of person signing)	
	(Title of person signing)	