P00000108770

(Re	equestor's Name)		
(A	ddress)		
(A	ddress)	14.1.0%	
(C	ity/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



700270252807

anena

03/06/15--01022--016 **43.75



3/10/15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: B	OUCK MANA	GEMENT D	ssucrares ICC.	
DOCUMENT NUMBER: $\overline{\Psi} \circ \underline{\varphi}$	0001 087	70		
The enclosed Articles of Amendment	and fee are submitted for	or filing.		
Please return all correspondence conce	erning this matter to the	following:		
William	, Bouck Name			
	Name	of Contact Person		
Bouck	MANNS EMONT	MSSCCIARE	3.INC.	
	w 61 Phace			
15124 1	co of Aluch	Address		
_	. •			
Mism	1 FL 33015 City/5			
	City/ S	State and Zip Code		
	mgmt. com		18 and any	
E-mail add	iress: (to be used for fu	ture annual report not	ilication)	
For further information concerning this	s matter, please call:			
William T. Bouck Name of Contact Person		_at (<u>3</u> 65)	915-3619	
Name of Contact Person	on	Area Code	& Daytime Telephone Number	
Enclosed is a check for the following	amount made payable to	the Florida Departm	nent of State:	
	te of Status Certi (Add	75 Filing Fee & [Fifed Copy itional copy is osed]	1\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Ad	dress_	
Amendment Section		Amendment Section		
Division of Corporations Division of Corporations			•	
P.O. Box 6327 Tallahassee, FL 323	14	Clifton Bu 2661 Exec	alding autive Center Circle	
Tananasce, 115 se,	1 7	2001 15300	anve center enere	

Tallahassee, FL 32301

•			
		FILED	}
	Articles of Amendment	•	
<u></u>	Articles of Incorporation	2015 HAR -6 F	M 3: 30
	of	1	E STATE
	ement Asso	ciates /	PCORIDA
(Name of Cornoration as currently	filed with the Florida Dept. of	Sinta)	
	01 087 70		
(Document Number of	of Corporation (if known)		
ursuant to the provisions of section 607.1006, Florid Articles of Incorporation:	de Statutes, this <i>Florida Profit</i> (Corporation adopts the following	oving amendme
Damending name, enter the new pame of the	corporation:		
			7h
tme must be distinguishable and contain the Wi	and "comparation " "company	" or "Incompanded" or t	
Enter new principal office address, if applicable rincipal office address MUST BE A STREET AD	ODRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BEA POST OFFICE B	návi		
(withing anniess well bear 1991 ALLICE B	<u></u>		
			
	1		
			
if amending the registered agent and/or regist	ered office address in Florida	enter the name of the	
new registered agent and/or the new registeres	n of lice woulder:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		Florida	
	(Chy)	(Zip Cod	e)
ew Registered Agent's Signature, if changing Re	egistered Agent:		
sereby accept the appointment as registered agent.			

Page i of 4

Signature of New Registered Agent, 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	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	2 Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change	<u> </u>	SANDRA H. BOUCK	18126 NW 61 Phase
∧dd			Hiploph RL33015
Remove			
2) X Change	PISITIO	William T. Bouck	1812/MDP1 BYAKE
Add			Hipteph, FL 3395
Remove			
3) Change			
Add			
Remove			
4) Change			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ch additional sheets, if necessary).	(Be specific)			
			<u> </u>	
	<u>. </u>			
			 _	 ,
amendment provides for an exc	hange, reclassific	ation, or cance	llation of issue	d shares,
visions for implementing the amo				
(if not applicable, indicate N/A)				
			, , , , , , , , , , , , , , , , , , , 	
		·	- -	
	-		· 	

The date of each amendment(s) adoption: February 1, 20/3	, if other than the
date this document was signed.	
Effective date if applicable: February 1, 2015	_
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was Avere adopted by the shareholders. The number of votes cost for the amendment(s) by the shareholders was Avere sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	•
(valing group)	
The amendment(s) was/were adopted by the board of directors without sharcholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated V FubRUDRY 17, 2015	
Signature Milliam + Baul	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
William T Bouck (Typed or printed name of person algning)	
(Typed or printed name of person signing)	•
President	
Pride a Parime - alarita de la lacada de lacada de la lacada de lacada de la lacada de lacada de lacada de la lacada de lacada	