# P11000018781

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	lv lt



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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:	Hillcrest Properties III, Ir	<u>.                                    </u>
DOCUMENT NU	MBER:	P11000018781	
The enclosed Artic	eles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		Marcy Kast	
	N	ame of Contact Person	
	Lights	ey & Associates, P.A.	
		Firm/ Company	
2105 Park Avenue North			
		Address	
	Win	iter Park, FL 32789	
	C	ity/ State and Zip Code	<del></del>
	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
	Marcy Kast	at (407)63	22-0025
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depart	tment 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	le



July 30, 2012

MARCY KAST LIGHTSEY & ASSOCIATES, P.A. 2105 PARK AVENUE NORTH WINTER PARK, FL 32789

SUBJECT: HILLCREST PROPERTIES III, INC.

Ref. Number: P11000018781

We have received your document for HILLCREST PROPERTIES III, INC. and your check(s) totaling \$280.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 012A00019904

#### Articles of Amendment to Articles of Incorporation of



Hillcrest Properties III	l, Inc. the Florida Dept. of State)
(Name of Corporation as currently filed with	the Florida Dept. of State)
P11000018781	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations of the contain the word "corp."	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	450 S. ORANGE AVENUE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	SUITE 400
	ORLANDO, FL 32801
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	450 S. ORANGE AVENUE
(muning numess MAI BLATOSI OTTICE BOX)	
	SUITE 400 ORLANDO, FL 32801
D. 16	address in Florida, sustantha nama of the
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent:	
New Registered Office Address: (Flor	ida street address)
	, Florida
(City,	(Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent: iliar with and accept the obligations of the position.

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)

<u>Title</u>	Name	Address	Type of Action
D	RENEE W. SMITH	450 S, ORANGE AVENUE ORLANDO, FL 32801	☐ Add ☑ Remove
<u>s</u>	TIM LITTLE	450 S. ORANGE AVENUE SUITE 400 ORLANDO, FL 32801	☑ Add □ Remove
T	TIM LITTLE	450 S. ORANGE AVENUE SUITE 400 ORLANDO, FL 32801	✓ Add □ Remove
	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

## 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:

Title	Name	Address	Type of Action
P	Chirag Bhavsar	450 S. Orange Avenue Suite 400 Orlando, Florida 32801	Add

The date of each amendment	t(s) adoption: JULY 3, 2012
•	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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	"
by	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_JUL	Y <u>1</u> , 2012
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	T, W LITTLE
	(Typed or printed name of person signing)
	Director
	(Title of person signing)