# P1700033813

Office Use Only



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05/22/17--01016--016 \*\*52.50

Ancl MAY 25 2017 R. WHITE

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Agora at Port Rich	ney GP, Inc.		
DOCUMENT NUME	P17000033812			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
	John A. Taylor			
		Name of Contact Person		
	Fassett, Anthony & Taylor, P.A.			
	Firm/ Company			
	1325 W. Colonial Drive			
	Address			
	Orlando, FL 32804			
		City/ State and Zip Code		
jtaylo	r@fassettlaw.com			
	E-mail address: (to be u	sed for future annual report i	notification)	
For further information	concerning this matter, pleas	se call:		
John A. Taylor		at ( 407	872-0200	
Name of Contact Person			le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depar	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)	
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 17 May 22 Mills 1-5

Agora at Port Richey GP, Inc.		each Mr. in		
(Name of Corporation (Name of Corporation)	tion as currently	filed with the Florida	Dept. of State)	
P17000033812				
(Docu	ment Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Fi	lorida Profit Corporat	ion adopts the follow	ving amendment(s
A. If amending name, enter the new name of the o	corporation:			
				The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or the	p, " "Inc, " or "Co	o". A professional co		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD				
			<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>OX</u> )			
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registe	ered office addres	s in Florida, enter th	e name of the	
new registered agent and/or the new registered		B III I I I I I I I I I I I I I I I I I	e mano or tac	
Name of New Registered Agent				
<del> </del>	(Florida street	address)		<del></del>
New Registered Office Address:			. Florida	
To the state of th	(C	ity)	<del></del> /	p Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		h and accept the oblig	ations of the position	2
noreby decept the appointment as registered agent.	rum jummur wit	n und decept the oong	unons of the position	<i>ι</i> .
Sign	nature of New Rec	istered Agent if change	nina	

## 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Freddy Twik	14310 N. Dale Mabry Hwy, Ste 250
Add			Tampa, FL 33618
XX Remove			
2) Change	VP	Shai Twik	14310 N. Dale Mabry Hwy, Ste 250
Add			Tampa, FL 33618
XX Remove			
3 ) Change	Sec	Ayal Twik	14310 N. Dale Mabry Hwy, Ste 250
XX Add			Tampa, FL 33618
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach àdditional sheets, if necessary).	(Be specific)
,	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amor	ndment if not contained in the amendment itself:
Statistons for inflictuciffing the siller	
(if not applicable, indicate N/A)	

The date of each amendment(s) a	adoption;, i	f other than the
date this document was signed.	/27/2017	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not repartment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes case	t for the amendment(s) was/were sufficient for approval	
by	n	
~ <u> </u>	(voting group)	
action was not required.	lopted by the board of directors without shareholder action and shareholder	
action was not required.		
04/27/201 Dated		
Signature		
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	Gerard Abitbol	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Agora at Port Rick	ney GP, Inc.	
DOCUMENT NUMI	P17000033812	<u> </u>	
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	Fassett, Anthony & Taylor, I	P.A	
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	1325 W. Colonial Drive		•
		Address	
	Orlando, FL 32804		·
		City/ State and Zip Code	3
itavlo	r@fassettlaw.com		
<del></del>	_	sed for future annual report	notification)
	•	·	•
For further information	n concerning this matter, plea	se call:	
John A. Taylor		at ( <sup>407</sup>	872-0200
Name of Contact Person		Area Coo	) 872-0200 de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	navable to the Florida Dena	rtment of State:
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Mailing Address		Street Address	
	ndment Section	Amendment Section	
	sion of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301