PG: 2383, 03/11/2014 at 04:04 PM, RECORDING 3 PAGES 2014068026 BK: 18334 \$27.00 KEN BURKE, CLERK OF COURT AND COMPTROLLER PINELLAS COUNTY, FL BY DEPUTY CLERK: CLKPR03 Reinra ia This Instrument Prepared by and Return to: Robert L. Tankel, Esq. Address: Robert L. Tankel, P.A. 1022 Main St. Suite D Dunedin FL 34698 SPACE ABOVE THIS LINE FOR PROCESSING AND RECORDING DATA CERTIFICATE OF AMENDMENT TO ARTICLES OF INCORPORATION OF THE WEST RIDGE OF SEMINOLE HOMEOWNERS ASSOCIATION, INC. WE HEREBY CERTIFY THAT the attached Articles of Amendment to the Articles of Incorporation of West Ridge of Seminole Homeowners Association, Inc., which Declaration was originally described in O.R. Book 15514 at Page 196, of the Official Records of Pinellas County, Florida, were duly approved in the manner required therein, at a Membership Meeting held on March 3, 2014. IN WITNESS WHEREOF, we have affixed our hands this U day of MAYCH at Pinellas County, Florida. WEST RIDGÉ OF SEMINOLE HOMEOWNERS ASSOCIATION, INC. (n/k/a WEST RIDGE OF SEMINOLE H.O.A., INC.) Tony Segalla, its President Cheri Parsons, its Secretary STATE OF FLORIDA COUNTY OF PINELLAS BEFORE ME, the undersigned authority, personally appeared Tony Segalla and Cheri Parsons, to me known to be the President and Secretary, respectively, of West Ridge of Seminole Homeowners Association, Inc. (n/k/a West Ridge of Seminole H.O.A., Inc.) and they jointly and severally acknowledged before me that they freely and voluntarily executed the same as such officers, under authority vested in them by said corporation. They are personally known to me or have produced (type of identification) as identification. my hand and official scal in the County and State last aforesaid, this Notary Public Printed Name: My commission expires: 8/29/15 THISTA PARESHIS COMMISSION # ET 195053

Articles of Amendment to	
Articles of Incorporation	
of	
WEST/RIDGE OF SEMINOLE HOMEOWNERS ASSOCIATION, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N06000010020 \\	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1906. Florida Statutes, this Florida Not Far Profit Corporation adopts the foundment(s) to its Articles of Incorporation:	Howing
A. If amending name, enter the new name of the corporation:	
WEST RIDGE OF SEMINOLE H.O.A., INC.	he new
name must be distinguishable and contain the word "corporation" or "incurporated" or the abbreviation "Corp," or "Company" or "Co." may not be used in the name.	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
A STATE OF THE STA	
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:	
(Florido suest address)	
New Registered Office Address:	
, Florida	
(City) \\\\\\((Zip Code)	addis.
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered ogens. I am familiar with and accept the obligations of the position.	\
)
Signature of New Registered Agent, if changing	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : / / / (no more than 90 days after amendment file date)	
to more than 20 mays they amendera for many	, 6 % -
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east 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 3.3.1	
Signature -	
(By the 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)	***
(Typed or printed name of person signing)	
(Title of person signing)	
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