### Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions



### **Certificate of Amendment**

This space reserved for office use.

FILED:
In the Office of the
Secretary of State of Texas

JUN 1 3 2018

Corporations Section

Marketon (5/52/00)	Address of the Addres	10100240
L' moduder	Informa	tion
E-HELLEV	Informa	

The name of the filing entity is:				
BUERNE SASSlehorn Hom	e Owners association, Duc.			
	ds of the secretary of state. If the amendment changes the name			
The filing entity is a: (Select the appropriate entity type below.)				
☐ For-profit Corporation	Professional Corporation			
	☐ Professional Limited Liability Company			
Cooperative Association	n Professional Association			
Limited Liability Company				
The file number issued to the filing entity by the secretary of state is: 801637/27				
The date of formation of the entity is: Olugust 06, 2012				
	U			
Amendments				
	ended Name change the name of the entity, use the following statement)			
The amendment changes the certificate of formatiling entity. The article or provision is amended	tion to change the article or provision that names the to read as follows:			
The name of the filing entity is: (state the new na BUERNE SA Ille horn Nome)	OWNERS association, DNC.			
The name of the entity must contain an organizational designation	n or accepted abbreviation of such term, as applicable.			

#### 2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

. (Complete	Registered Agent either A or B, but not both.	Also complete C.)	
☐ A. The registered agent is an org	ganization (cannot be entity	named above) by the name of	£ -,
B. The registered agent is an ind	lividual resident of the s	state whose name is:	
First Name	M.I. Last Name		Suffix
The person executing this instrument has consented to serve as registered a		on designated as the new	registered agent
C. The business address of the regist	tered agent and the regis		
321 DERVY DRIVE Street Address (No P.O. Box)	BUERNE	TX	78006 Zip Code
is insufficient, incorporate the additional text form for further information on format.  Text Area (The attached addendum, if any, is incorporated in the following provision and the following provi	rporated herein by reference.)	f formation. The identific	
Alter each of the following provi	isions of the certificate of d the full text of the pro	of formation. The identification as amended are as	cation or follows:
	1 00000000		
Delete each of the provisions ide	entified below from the o	certificate of formation.	8

# Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

Form 424

# Effectiveness of Filing (Select either A, B, or C.)

A. This document becomes effective when the document is filed by the secretary of state.		
B. This document becomes effective at a later date, which is not more than ninety (90) days from		
the date of signing. The delayed effective date is:		
C. This document takes effect upon the occurrence of a future event or fact, other than the		
passage of time. The 90 <sup>th</sup> day after the date of signing is:		
The following event or fact will cause the document to take effect in the manner described below:		
Execution		
The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.		
Date: 6/7/18  By: SUE NARRISON JEWELL		
Sur Wannion Towell		
Signature of authorized person		
SUE HARRISON T (EWELL		
Printed or typed name of authorized person (see instructions)		