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JUN 19 2015 R. WHITE

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION		Homeowners Associa	tion Inc,	
	742302			
DOGUMENT NUMBER:			•	
The enclosed Articles of An	nendment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Greg Kaufmann				
	(Name of Contact Perso	n)	· · · · · · · · · · · · · · · · · · ·
Miccosukee Meadows Hom	neowners Association Inc.			
		(Firm/ Company)		
Po Box 12904				
		(Address)		
Tallahassee, Florida 32317				
	(City/ State and Zip Cod	le)	
gregkaufmann@hotmail.co	m			
. • E	-mail address: (to be used t	or future annual report	notification)
For further information cond	erning this matter, please c	all:		
Greg Kaufmann		85 at	50	562-2742
	(Name of Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	able to the Florida Dep	artment of S	itate:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailina A	Address	Street	Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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15 33.1 11 温源58 Miccosukee Meadows Homeowners Association Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 742302 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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)

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 X Remove X Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Richard Lunsford	4515 argyle lane
Add			Tallahassee, Fl. 32309
X Remove			
2) Change	T	Gregory Kaufmann	4494 argyle lane
X Add			Tallahassee, Fl. 32309
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Chanca			·
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)
N/A	
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The date of each amendm date this document was sign	· · · · · · · · · · · · · · · · · · ·	, if other than th
Effective date if applicabl	e:	
	(no more than 90 days after amendment file date)	
	n this block does not meet the applicable statutory filing requirements, this date will not in the Department of State's records.	be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) wa was/were sufficient fo	s/were adopted by the members and the number of votes cast for the amendment(s) rapproval.	
There are no members adopted by the board	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
Dated	3/2015	
hav	the chairman of vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	_
	Jon Lunsford	
•	(Typed or printed name of person signing)	
	President, Miccosukee Meadows Homeowners Association Inc.	
•	(Title of person signing)	