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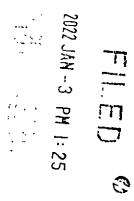
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C. BRÜMBLEY
JANJAN 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NAME OF CORPORATION:	neber OWNE	es' Association, INC.
DOCUMENT NUMBER: 754193		
The enclosed Articles of Amendment and fee are submitte	I for filing.	RECEIVED
Please return all correspondence concerning this matter to	he following:	2022 JAN -3 PM 2: 53
Beverly Hovious	ne of Contact Person)	SALBETARY BY STATE
HARTRIDGE HARbOR QU	Pres' Association (Company)	
P.O. Box 481	(Address)	
WINTER HAVEN, FL	33882 / State and Zip Code)	
HARTRIDGE hLORE a Ma		
For further information concerning this matter, please call:		
Beverly Horious (Name of Contact Person)	at <u>86</u> .	3- 287-4377 Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payabl	to the Florida Departn	ent of State:
· (A	3.75 Filing Fee & □ rtified Copy Iditional copy is closed)	1852.50 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	The Centr	

Tallahassee, FL 32303

Articl	les of Amendment	20
	to	F !!
Article	es of Incorporation	<u> </u>
	of	
HARTE des HARRIS MUNICOS' A	7550ciation True	- ω - Π
WARTE Ide WAR hoe Ownsers H Name of Corporation as currently filed with the Florida	Dept. of State)	P. I
	,	
754193		
(Document Num)	ber of Corporation (if known)	25
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporati	on adopts the following
A. If amending name, enter the new name of the corpora	ition:	
•		The new
name must be distinguishable and contain the word "corpora	ation" or "incorporated" or the abbreviat	
"Company" or "Co." may not be used in the name.	•	·
	3601 Old Lake AL	C. P.A
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	WINTER HAVEN, FL	33881
	<u> </u>	
		
C. Enter new mailing address, if applicable:	P.O. Box 481	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
	Winter HAVEN FL	33882
	70070	
D. If amending the registered agent and/or registered of		<u>of the</u>
new registered agent and/or the new registered office	_	
Name of New Registered Agent: WA	LLY BLACKBURN	
<u>_</u> _3 <u>.3.7</u>	48 HARBOR CIRCLE, NW (Florida sucer address)	
New Registered Office Address:	7 KA ME SHEET HAIR CS.	
	· T 1.1.	22001
U!#	VTER HAVEN FIG.	orida <u>3 3 3 8 1</u>
	(City)	Zip Code)
New Registered Agent's Signature, if changing Registere	d Avent:	
I hereby accept the appointment as registered agent. I am f	aniliar with and accept the obligations of	the position.
· · · · · · · · · · · · · · · · · · ·	· Au Di	•
	the Black I	
	m I / will	
	Signature of New Registered Agent, if char	тушу

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	V Mike	Doe e Jones e Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>_P_</u>	Stephen Pifer	3545 Harbor Circle NU Winter Haven
Remove 2) Change Add	P	WALLY BLACKBURN	Florida 3388 3548 HARbor Circle NW WINTER HAVEN,
Remove 3) Remove Add Remove			Florida, 33881
4) Change Add			
Remove 5) Change Add		<u>. </u>	
Remove 6) Change Add			
E. If amending or add (attach additional sh	ling additional A eets, if necessary	Articles, enter change(s) here:). (Be specific)	

<u> </u>
The date of each amendment(s) adoption: $\frac{12/1}{2!}$, if other than the
The date of each amendment(s) adoption: $\frac{12\sqrt{1/2}}{1/2}$, if other than the date this document was signed.
due this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

2	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 /2/28/2/
	Signature Bevely Hovious (By the chairman or vice 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)
	Beverly Hovious (Typed or printed name of person signing)
	ScereTary (Title of person signing)