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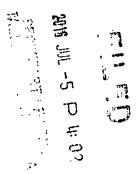
(Re	questor's Name)	
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· (Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Etowah Homeow	vners Associatio	n Inc.			
N06000012495 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are su	ubmitted for filing	•			
Please return all correspondence concerning this ma	atter to the followi	ng:			
Mike Miller					
	(Name of Cont	act Person	n)		
Empire Management Group					
	(Firm/ Cor	npany)			
1135 East Ave					
	(Addre	ess)			
Clermont, FL 34711					
	(City/ State and	Zip Cod	e)		
mmiller@empiremanagementgrp.com		,			
E-mail address: (to be us	ed for future annu	al report	notification	1)	
For further information concerning this matter, pleas	se call:				
Mike Miller		40 at)7	832-0573	
(Name of Contact Person	on)		rea Code)	(Daytime Telephone Number))
Enclosed is a check for the following amount made	payable to the Flo	rida Depa	artment of	State:	
\$35 Filing Fee Sectificate of Status	•	рy	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address Iment Section of Corport Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida D	Dept. of State)
N06000012495		
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the corporation/a	on:	
name must he distinguishable and contain the word "corpora	ion" or "invorporated" or	the abbreviation "Corn" or "Inc."
"Company" or "Co." may not be used in the name.	um or meorporatea or	ine abbreviation Corp. or the.
B. Enter new principal office address, if applicable:	n/a	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	
(maining audress MAT BE ATOST OFFICE BOX)		
		
D. If amending the registered agent and/or registered office		r the name of the
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:		·
New Registered Office Address:	(Florida s	street address)
		Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fa		bligations of the position.
	ionature of Novy Benistaved	Apart if alternation
3.	ignature of New Registered	Agent, if changing
	Dame 1 a C 4	
	Page 1 of 4	5

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	<u>V</u> <u>M</u> i	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VP</u>	Conrad, Mark	1135 East Ave
Add			CLERMONT, FL 34711
X Remove			
2) Change	P	Edwards, Dan	1135 East Ave
Add			CLERMONT, FL 34711
X Remove			
3) Change	S/T	Meier, Joe	1135 East Ave
Add			CLERMONT, FL 34711
X Remove			***
4) Change	VP	Nicholas Christakos	1135 East Ave
x Add			CLERMONT, FL 34711
Remove			
5) Change	P	Mike Galvin	1135 East Ave
× Add			CLERMONT, FL 34711
Remove			
6) Change	S/T	Susan Collins	1135 East Ave
× Add			CLERMONT, FL 34711
Remove			

E. If amending or adding additional Articl (attach additional sheets, if necessary).	(Be specific)			
n/a				
			······································	
				·· •••
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•	6/28/16	
The date of each amendment	(s) adoption:	, if other than the
date this document was signed.	·	
	6/28/16	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
Dated 6/30/	16	
Signature	Mall	
have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Mil	ke Miller	
**************************************	(Typed or printed name of person signing)	
LC	АМ	
,	(Title of person signing)	