N07099

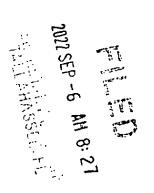
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COVER LETTER

TO: Amendment Section Division of Corporations

Old Englewood V NAME OF CORPORATION:	illage Association, Inc	·	
N07099 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
Kathi Obendorfer			
	(Name of Contact I	Person)	
Old Engelwood Village Association, Inc.			
	(Firm/ Compar	ıy)	
170 W Dearborn Street Suite B			
	(Address)	-	
Englewood, FL 34223			
	(City/ State and Zip	Code)	
kathi.obendorfer@gmail.com			
E-mail address: (to be u	sed for future annual re	port notification	n)
For further information concerning this matter, plea	ase call:		
Kathi Obendorfer	a	941 t	445-3775
(Name of Contact Pers	son)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida	Department of	State:
□ \$35 Filing Fee	_	is Certi (Add	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section	-	treet Address mendment Sect	tion

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Old Englewood Village Association, Inc.

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Name of Corporation as currently filed with the	e Florida De	ept. of State)		
N07099			٠,	TALLAHASSEE, FI
(Docum	nent Numbe	r of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006. Flor amendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not For</i>	r Profit Cor	poration adopts the following
A. If amending name, enter the new name of the	e corporatio	on:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporated	" or the abb	previation "Corp," or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.		170 W Dearborrn Stro	eet Suite B	
		Englewood, FL 34223		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u>)	170 W Dearborn Stre	et Suite B	
	! -	Englewood, FL 34223		14.7
D. If amending the registered agent and/or registered agent and/or the new registered.			enter the n	ame of the
Name of New Registered Agent:	Kathi Ober	ndorfer		
	170 W Dea	arborn Street Suite B		
<u>New Registered Office Address:</u>		(Fle	orida street ado	dress)
	Englewood	i		, Florida 34223
		(City)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered 1 at. I am fam	Agent: niliar with and accept i	the obligation	ons of the position.
	-/	athi C	Berid	ole
	Sig	gnature of New Registo	ered 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 John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change × Add	<u>Presiden</u>	Kathi Obendorfer	170 W Dearborn Street Suite B Englewood, FL 34223
Remove 2) * Change Add	Presiden	Robert Reil	1811 Englewood Road #186 Engelwood. FL 34223
* Remove 3) * Change Add * Remove	<u>Director</u>	Elaine Miller	1811 Englewood Road #186 Englewood, FL 34223
4) × Change Add	Vice Pre	Kathi Obendorfer	1811 Englewood Road #186 Englewood, FL 34223
X Remove 5) X Change Add	Vice Pre	John Majka	1811 Englewood Road #186 Englewood, FL 34223
6) Change Add	Secretar	James Dale Schepers	7 Perimeter Drive Engelwood, FL 34223
(attach additional shee	rts, if necessary).	cles, enter change(s) here: (Be specific) ger 1811 Englewood Road #186 Englewood.	FL 34223

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The date of each amendment(s) adoption: August 22, 2022	, if other than the
date this document was signed.	, ii onici man me
Effective date if applicable: August 22,2022	
(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 document's effective date on the Department of State's records.	e listed as the
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.	

There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	August 22,2022
Signature	Kathi Crendo for
(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)
	Kathi Obendorfer
•	(Typed or printed name of person signing)
	President Alli Peacle Chu (Title of person signing)

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