## N08000005861

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<del>; #</del> )
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filina Officer:	
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Amend

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATIO		MS HOMEOWNERS A	SSOCIAT	TION, INC.	
	N08000005861				
DOCUMENT NUMBER: _					
The enclosed Articles of Amo	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
ANN BLACK					
	(	Name of Contact Person	n)		
SMITH, THOMPSON, SHA	W, MINACCI, COLON 8	& POWER, P.A.			
		(Firm/ Company)			
3520 THOMASVILLE ROA	D, FOURTH FLOOR				
		(Address)			
TALLAHASSEE, FL 32309					
	(	City/ State and Zip Cod	e)		
cathomp@embarqmail.com					
E	mail address: (to be used	for future annual report	notification	1)	
For further information conce	erning this matter, please c	all:			
ANN BLACK		85 at	0	893-4105	
(	Name of Contact Person)		rea Code)	(Daytime Telephon	e Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Depa	artment of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & C Certificate of Status	343.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
<u>Mailing A</u> Amendmer			Address Iment Sect	ion	

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## **Articles of Amendment** to **Articles of Incorporation** of

ntly filed with the F	lorida Dept. of State)		
ber of Corporation (i	f known)	•	
tes, this <i>Florida Not</i>	For Profit Corporation ad	opts the i	following
tion:			
			The new
ation" or "incorpord	ited" or the abbreviation "	Corp." o	r "Inc."
<u> </u>		<u>.</u>	
		100 mg	29
			Trus
		111-12	‡
	da, enter the name of the		G G
(Florida street address)			
(City)	(Zip C	'ode)	
d Agent: familiar with and acc	ept the obligations of the p	osition.	
Cianalana CN D			<del></del>
	iber of Corporation (intes, this Florida Notation:  ation:  ation" or "incorporation" or	ation" or "incorporated" or the abbreviation "  fice address in Florida, enter the name of the address:   (Florida street address)  , Florida (City) , Florida (Zip C)  d Agent: Camiliar with and accept the obligations of the positions.	tes, this Florida Not For Profit Corporation adopts the faction:  ation:  ation" or "incorporated" or the abbreviation "Corp." of the address in Florida, enter the name of the address:  (Florida street address)  (Florida

## 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 <math>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>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			<del></del>
Remove			
3) Change		<del></del>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
Paragraph III of the Articles shall be amended to read as follows:  The purpose for which the corporation is organized is to provide for the preservation of the values, amenities, attractivenes		

The date of each amendment(s) adoption;	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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, document's effective date on the Department of State's records.	this date will not be 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 arwas/were sufficient for approval.	mendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	) was/were
Dated MARCH 13, 2017	
Signature  (By the chairman or vice chairman of the board, president or other officer-	:Fdimetone
have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
LEX C. THOMPSON	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	