N08201

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	dress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
	siness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

Tyler's Cove Homo	xowners Associati	on, Inc			
NAME OF CORPORATION:					
N08201					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are sub	omitted for filing.				
Please return all correspondence concerning this matt	er to the followin	g:			
Mitchner R. Mumey					
	(Name of Conta	ct Person)			_
Tyler's Cove Homeowners Association, Inc					
	(Firm/ Com	pany)			_
550 Thames Circle					
	(Addres	s)			
Longwood Florida 32750					\$ \(\frac{1}{2} \)
	(City/ State and	Zip Code)		 2	
mmumey@gmail.com				JAN 3	
E-mail address: (to be use	d for future annua	l report notificatio	n)		_38;
For further information concerning this matter, please	e call:			AH .	골유덕
Mitchner Mumey		407	256-4099	8: <u>3 </u>	NATE
(Name of Contact Person	n)	at (Area Code)	(Daytime Telephon	e Number)	37
Enclosed is a check for the following amount made p	ayable to the Flor	ida Department of	State:		
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status		y Certif opy is Certif (Addi	0 Filing Fee icate of Status ied Copy itional Copy is osed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle		

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2019 DEC -4 FM 10: 11



January 14, 2020

MITCHNER R MUMEY TYLER'S COVE HOMEOWNERS ASSOCIATION, INC 550 THAMES CIRCLE LONGWOOD, FL 32750

SUBJECT: TYLER'S COVE HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N08201

We have received your document for TYLER'S COVE HOMEOWNERS ASSOCIATION, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

7070 Cir. 30 First

Letter Number: 420A00001044

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

	3
(Name of Corporation as currently filed with the Florida Dept. of State) Tyler's Cove Homeowners Association, Inc N08201	OF ST
(Document Number of Corporation (if known)	4. 3.1 OH

L. If amending name, enter the new name of the corpo		
	ration:	
ame must be distinguishable and contain the word "corpe Company" or "Co." may not be used in the name.		The new r the abbreviation "Corp." or "Inc."
L Enter new principal office address, if applicable:	550 Thames Circle	
Principal office address <u>MUST BE A STREET ADDRES</u>	SS) Longwood, Florida 327:	50
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
If amending the registered agent and/or registered of new registered agent and/or the new registered offic		er the name of the
Mitch <u>Name of New Registered Agent:</u>	nner R. Mumey	
550 T	hames Circle	
New Registered Office Address:	(Florida	z street address)
Long	wood	32750 , Florida
	(City)	(Zip Code)

Signature of New Registered Agent, if changing

Page 1 of 4

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>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change	Treasure	William Marsh	526 Thames Circle
Add x Remove			Longwood, Florida 32750
2) Change	Treasure r	Mitchner R. Mumey	550 Thames Circle
Add			Longwood, Florida 32750
Remove			
3) Change			
Add			
4) Change			
Add			
5) Change			-
Add			
6) Change			
Add			
Remove			<u></u>

Left amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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NA					·
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The date of each amendment(s) adoption: , if other than the date this document was signed. November 3, 2019 Effective date if applicable: (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. 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 Signature (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) Chris Martin (Typed or printed name of person signing) President (Title of person signing)

November 2, 2019