N142018

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: THE VILLAGES HOMEOWNERS ASSOCIATION IN OF THE VILLAGES OF LAKE/MARION/SULTER
DOCUMENT NUMBER: N 42018
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RAYMOND H. GLESSNER
(Name of Contact Person)
THE VILLAGES HOME OWNERS ASSOCIATION THE VILLAGES OF THE VILLAGES OF THE VILLAGES OF
1104 MAIN STREET
(Address)
LADY LAKE, FL 32/57 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
RAYMOND H. GCESSNER at 352 751-0701 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\times 12 \times 35 \text{ Filing Fee} \tag{1} \times 43.75 \text{ Filing Fee} \tag{2} \tag{43.75 \text{ Filing Fee}} \tag{2} \tag{52.50 \text{ Filing Fee}} \tag{2} \text{ Certificate of Status} \tag{2} \text{ Certified Copy} \tag{2} Certif

enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is

Enclosed)

Articles of Amendment to Articles of Incorporation of

THE VILLAGES HOMEOWNERS AS ARIDAL /SVINTE/(Name of Corporation as cu	rrently filed with the Flori	ia Dept. of State
N42018		
	umber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	Profit Corporation adopts the following
. If amending name, enter the new name of the corpo	oration:	
THE VILLAGES HOMEOWNERS	ADVOCATES	Tive The new
ame must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	ooration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	/
-		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		0.10
· •		7
		± 5 S
D. If amending the registered agent and/or registered	office address in Florida .	nter the name of the
new registered agent and/or the new registered offi		inter the name of the
Name of New Registered Agent:	,	
		L. C. AMBILITATION
	(Flo	rida street address)
New Registered Office Address:		
	/	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I a		ne obligations of the position
no coj accept nie appointient as registered agent. Tal	m minimum with the tecopi t	to conferroun of mo boomoni
	Signature of New Registe	red 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 V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

mending or adding additional Arti ach additional sheets, if necessary).	(Be specific)			
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			-	
			1101 G 07 P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

The date of each amendment(s) adoptate this document was signed.	tion:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amen	ndment file date)
Note: If the date inserted in this block locument's effective date on the Depar		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of	of votes cast for the amendment(s)
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were
Dated	5/2016	
	5/20/6 Shirt Helling A Lessue n or vice chairman of the board, presi	
have not been s	selected, by an incorporator – if in the sointed fiduciary by that fiduciary)	
RAY	MOND H. GLESSN (Typed or printed name of	EN.
	(Typed or printed name of	of person signing)
7	REASURER	
	(Title of person	on signing)