

1404000009340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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*Amend*  
*[Signature]*

SECRETARY OF STATE,  
TALLAHASSEE, FLORIDA

2009 OCT -5 AM 8:59

FILED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Black Lake Park Homeowner's Association, Inc.

DOCUMENT NUMBER: NO4 00000 9340

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Wonsetler  
(Name of Contact Person)

Karen Wonsetler, P. A.  
(Firm/ Company)

860 N. Orange Ave Suite 135  
(Address)

Orlando, FL 32801  
(City/ State and Zip Code)

Karen Wonsetler @ Yahoo. Com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Wonsetler at ( 407 ) 770-0846  
(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:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|---|--|--|

**Mailing Address**  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 26, 2009

KAREN WONSETLER, PA.  
KAREN WONSETLER PA LAWYER AND TITLE  
860 N. ORANGE AVENUE, SUITE 135  
ORLANDO, FL 32801

SUBJECT: BLACK LAKE PARK HOMEOWNERS' ASSOCIATION, INC.  
Ref. Number: N04000009340

We have received your document for BLACK LAKE PARK HOMEOWNERS' ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please accept our apology for failing to mention this in our previous letter.

Registered agent is not an officer of the corporation, therefore the agent can not sign the amendment. The Attorney has to have power of attorney in order to sign the documents.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 809A00028813

2009 OCT 15 AM 10:18  
STATE OF FLORIDA  
FILED

See Addt'l Signature of President

Thanks!

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2009 OCT -5 AM 8:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Black Lake Park Homeowner's Association, INC  
(Name of Corporation as currently filed with the Florida Dept. of State)

NO4000009340

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

*(Principal office address MUST BE A STREET ADDRESS)*

N/A

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

N/A

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:*

N/A

*New Registered Office Address:*

(Florida street address)

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

N/A

*Signature of New Registered Agent, if changing*



The date of each amendment(s) adoption: July 1, 2009

Effective date if applicable: August 24, 2009  
(date of adoption is required)  
(no more than 90 days after amendment file date)

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 Aug. 24, 2009

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)

Karen Wousetter  
(Typed or printed name of person signing)

Raphael Olivio  
Board Pres.

Registered Agent + Attorney  
(Title of person signing)