## N0400000230

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## COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations Abidjan Estates Homeowners Association, Inc. NAME OF CORPORATION: N04000000230 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Malinda L. Hayes, Esq. (Name of Contact Person) Law Offices of Malinda L. Hayes (Firm/ Company) 378 Northlake Blvd. #218 (Address) North Palm Beach, FI, 33408 (City/ State and Zip Code) Malinda@mlhlawoffices.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Malinda Hayes 537-3796 (Name of Contact Person) (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Abidjan Estates Homeowners Association, Inc.		78 Z
(Name of Corporation as currently filed with the Florida D	ept. of State)	   EC!   EC!
N0400000230		
(Document Number	er of Corporation (if known)	SSI P
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corpora</i>	tion adoptes ne woving
A. If amending name, enter the new name of the corporati	on:	5 <b>3</b>
Hillsborough Estates Homeowners Association, Inc.		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbrevio	tion "Corp." or "Inc."
B. Enter new principal office address, if applicable:	13415 SOUTHERN BLVD	
(Principal office address MUST BE A STREET ADDRESS)	Loxahatchee, FL 33470	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	c/o Law Offices of Malinda Hayes 378 Northlake Blvd. #218	
	North Palm Beach, FL 33408	<del></del>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac <u>Name of New Registered Agent:</u>		of the
	(Florida street address)	
New Registered Office Address:		
	F	lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		the position.
Sis	gnature of New Registered Agent, if cha	nging

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 I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	р	Walter B. Wilkinson	13415 SOUTHERN BLVD Loxahatchee, FL 33470
Remove 2) Change x Add	VP	William Poole	378 Northlake Blvd. #218 North Palm Beach, Fl 33408
Remove	<u>S</u>	Tara Gibb	13415 SOUTHERN BLVD Loxahatchee, FL 33470
4) Change	T	Ashley Wilkinson	PO BOX 25 Jupiter, FL 33468
Remove  5) Change Add Remove	D	Nathan Wilkinson	PO Box 25 Jupiter, FL 33468
6) Change Add		Shirley Turner	215 SW 6th Ave South Bay, Fl 33493
E. If amending or addi (attach additional she		rticles, enter change(s) here: (Be specific)	
Additional names to rem	nove from Article	s:	
Remove - Quesona Vere	-	St., Belle Glade Fl 33430	
Remove - Loretta Gaine		· · · · · · · · · · · · · · · · · · ·	
Remove - John Turner P	O Ray 873 South	h Ray Fl 33403	

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	2/10/22/Daged ada	nt nama (hanaa): 2/2/2	022(mombore vota in	Roard)
The date of each amendment(s) adoption: date this document was signed.		ηπ name change), 2/2/2		if other than the
date this document was signed.				
Effective date if applicable:			<u> </u>	
(n	o more than 90 day	s after amendment file	date)	
Market tests due to la divisió de la colonia.	and an experience of the second		nimanana aki daa	all and had limed a call a
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the application of State's records.	anie statutory ming req	unements, this date v	viii not be fisted as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. (The members voted to appoint the new Board of Directors)

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. (The Board of Directors adopted the name change and change of address
Dated 3/16/22 10
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)
William S. Poole
(Typed or printed name of person signing)
Vice-President, Board of Directors of Abidjan Estates Homeowners Association.
(Title of person signing)

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