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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Tierra Verde Community Association, In
DOCUMENT NUMBER: 7 02 634
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kelli Mathers, LCAM (Name of Contact Person)
(Name of Contact Person)
Trerva Verde Community Association, Inc.
(Firm/ Company)
1275 Pinellas Buyway S, 2nd Floor
(Address)
Ti erra Verde, FL 33715 (City/ State and Zip Code)
(City/ State and Zip Code)
Tassne tampabay. rr. com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kelli Mathers, LCAM (Name of Contact Person) at (727) 867-9362 (Area Code) (Daytime Telephone Number)
(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:
\$35 Filing Fee

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

TIERRA VERDE COMMUNITY ASSOCIATION, INC.

(Name of Corporation as currer	itly filed with th	e Florida Dept. of State)	
7026	634		
(Document Numb	per of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its 'Articles of Incorporation:	es, this <i>Florida i</i>	Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporat	ion:		
			The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ition" or "incorp	oorated" or the abbreviatio	on "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
			- P (S)
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office a		orida, enter the name of t	the BA
Name of New Registered Agent:			
Nume of New Registered Agent.			
New Registered Office Address:	(Florida street address)		
	_	Flori	da
	(City)	(Zi	p Code)
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent. I am fa	miliar with and	accept the obligations of th	e position.
S	ignature of New	Registered Agent, if chang	ing

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>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	I_	Tom Eskcidge	1275 Pinellas Bayway 2nd Floor Ticrra Werde, FL 33715
2) Change Add Remove	I	Peter Logli	1275 Pinellas Bayway 2nd Floor Tierra Werde, FL 33715
3) X Change Add Remove	DV	Dick Barcia	1275 Pinellas Bayway 2nd Floor Tierra Vende, FL 33715
4) Change Add Remove	<u></u>		
5) Change Add Remove			
6) Change Add			
Pamovo			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
•		
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The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).	
There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated 7-2	7/-/7	
Signature (D)	nan or vice chairman of the board, president or other officer-if directors	
have hor bee	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
	Terry Frul: 0 (Typed or printed name of person signing)	
	President (Title of person signing)	
	(Title of person signing)	