70799

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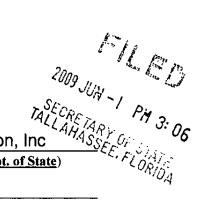
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Midway Cana	an Community Wate	r Association, Inc
DOCUMENT NUM	век: <u>710799</u>		
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		oria Hillery	
	(Name of	Contact Person)	
	Midway Canaan Com	munity Water Association	n, Inc
	(Firm	n/ Company)	
	PO	Box 1322	
	(Address)	
	Sanfor	d, FL 32771	
	(City/ Sta	te and Zip Code)	
		/2@cfl.rr.com d for future annual report no	tification)
For further information	on concerning this matter, pleas	e cali:	
Gloria Hillery		at (407) 323-	1714
(Name	of Contact Person)	(Area Code & Da	aytime Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departs	ment of State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



Midway Canaan Community Water Association, Inc (Name of Corporation as currently filed with the Florida Dept. of State)

710799
(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:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." <u>"Company" or "Co." may not be used in the name</u> .				
B. Enter new principal office address, if appli	icable:			
Principal office address <u>MUST BE A STREET</u>	TADDRESS)			
	<u></u>			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFIC	E BOX)			
		a, enter the name of th		
e. If amending the registered agent and/or re new registered agent and/or the new regist		a, enter the name of th		
		a, enter the name of th		
new registered agent and/or the new regist		a, enter the name of th		
new registered agent and/or the new regist		a, enter the name of th		
Name of New Registered Agent:	tered office address:	a, enter the name of th		

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.

Signature of New Registered Agent, if changing

removed a		rs, enter the title and name of each each Officer and/or Director being	
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Li Remove
shall rece	eive his proportionate shar e, insofar as is practicable	company, each member, include of the company's property an after paying or providing for the	d assets based upon
	прапу.		
	No.	·	

The date of each amendmen	t(s) adoption: August 18, 2009 May 27, 2009
Effective date if applicable:	May 27, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_May	27, 2009
Signature _	Lavia De Dem
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Gloria Hillery
	(Typed or printed name of person signing)
	Executive Director
	(Title of person signing)