712249

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900300711629

06/26/17--01009--022 **43.75

DEALER OF SUMMERS OF SUMER SUM

JUL 0 6 2017 C MCNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORDODATION. OFFIT O THE	PPD 466067.			
NAME OF CORPORATION: <u>OZELLO_WAY</u>	PER ASSOCIATION, IN	ic		
DOCUMENT NUMBER: 712249				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
MICHAEL	G WHETSTONE			
	(Name of Contact Perso	n)		
OZELLO WAT	TER ASSOCIATION, IN	c		
	(Firm/ Company)			
9769 WEST	OZELLO TRAIL			
	(Address)			
CRYSTAL RI	VER, FL 34429			
	(City/ State and Zip Cod	(e)		
ozellotc@tampa	abay.rr.com used for future annual report			
E-mail address: (to be	used for future annual report	notification)		
For further information concerning this matter, ple	ease call:			
MICHAEL G WHETSTONE	at (352)795-5331_		
(Name of Contact Per		rea Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount mad-	e payable to the Florida Dep	artment of State:		
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of State	e & \$\subset\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$\$ \$\subset\$\$\$\$ \$\subset\$\$\$\$\$\$\$\$ \$\subset\$	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section		Address		
Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327 Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

OZELLO WATER ASSOCIATION,	INC.		<u>િં</u> દ
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)	200
712249		Chr.	97
(Documen	t Number of Corporation (if ki	nown)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo.	r Profit Corporation adopts the following	10 S
A. If amending name, enter the new name of the co	rporation:		, , ,
		The new	
name must be distinguishable and contain the word "c	ornoration" or "incornorated		
"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 ADD)			
<u> </u>	,		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
) 60 11 1 TH		
D. If amending the registered agent and/or register new registered agent and/or the new regist		enter the name of the	
new registered agent and/or the new registered	did tos.		
Name of New Registered Agent:			
	(Flo	orida street address)	
New Registered Office Address:			
		, Florida	
_	(City)	(Zip Code)	
		, ,	
New Registered Agent's Signature, if changing Regi		at the according to	
I hereby accept the appointment as registered agent.	i am Jamiliar with and accept	the obligations of the position.	
	 -		
	Signature of New Regist	ored 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	<u>V</u> <u>M</u> :	nn <u>Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	ST	CINDY JOHANNESEN	3272 S LEE WAY
Add			HOMOSASSA, FL 34448
_X Remove			
2) Change	ST	TONIA COOK	5315 WEST RICHLAND LANE
<u>X</u> Add			HOMOSASSA, FL 34446
Remove			
3) Change	<u>P</u>	MICHAEL G WHETSTONE	3180 W. BERMUDA DUNES
_ <u>X_</u> Add			LECANTO, FL 34461
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		·	
6) Change	-		
Add			-
Remove			

<mark>f amending or addi</mark> attach additional she	ets, if necessary).	(Be specific)				
	,					
				····		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		-				
		V-0				
	••		***			
					,	
,,						
						
-						
		·				
					·	
			·		<u> </u>	
	················					

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	ot be listed as the
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 June 21-17	
Signature A. The	
(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)	
MICHAEL G. WHETSTONE (Typed or printed name of person signing)	
PRESIDENT Will A. A. H.	
(Title of person signing)	