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SECULIANT OF SIGN

JUL 2 C 2021

A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:EAST GATE ESTATES COMMUNITY ORGANIZATION, INC.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAPHNE TAYLOR-ROCKETT
(Name of Contact Person)
N'A
(Firm/Company)
3388 NW 22ND STREET
(Address)
LAUDERDALE LAKES, FLORIDA 33311-2714
(City/ State and Zip Code)
leastgatefamily@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAPHNE TAYLOR-ROCKETT 954-600-5763
(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 □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee & □ \$5

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2027 JUH 22 AM 8: 31

East Gate Homeowners Association, Inc.

S: Pari	PAE	TARY	OF.	STAT	7 C
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(Name of Corporation as currently filed with the Florida Do	ept. of State) (Ald. Alfa SS	
712519		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	i, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporation	on:	
EAST GATE ESTATES COMMUN	ITY ORGANIZATION, INC The new	
name must be distinguishable and contain the word "corporati" "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable:	3388 NW 22ND STREET	
(Principal office address MUST BE A STREET ADDRESS)	LAUDERDALE LAKES, FLORIDA 33311-2714	
-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3730 NW 23RD STREET	
-	LAUDERDALE LAKES, FLORIDA 33311	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		
	uress.	
Name of New Registered Agent:	<u></u> .	
New Registered Office Address:	(Florida street oddress)	
	Elorida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered A largeby accept the appointment as registered agent. I am fam		
 Sig.	nature of New Registered 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove		_	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addin</u> (a <i>ttach additional shee</i>		onal Articles, enter change(s) here: essary). (Be specific)	

		
		
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The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will no partment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad was/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s)	

Dated

Signature

(By the charman 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)

DAPHNE TAYLOR-ROCKETT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were