720295

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Interlake Apartmet NAME OF CORPORATION:	nt Association INC.		
720295 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su			
Please return all correspondence concerning this ma	itter to the following:		
Raymond Keyes			
	(Name of Contact Po	erson)	
Interlake Apartment Association Inc.			
	(Firm/ Company	·)	
402 Lake Clay Dr. S			
	(Address)		· · · · · · · · · · · · · · · · · · ·
Lake Placid, Florida 33852-9349			
	(City/ State and Zip	Code)	
keyes@embarqmail.com			
E-mail address: (to be us	ed for future annual rep	ort notification	n)
For further information concerning this matter, pleas	se call:		
Raymond Keyes	at.	954	445 5305
(Name of Contact Perso	on) at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida I	Department of	State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status		Certit s Certif	icate of Status ied Copy tional Copy is
Mailing Address Amendment Section	An	reet Address nendment Sect	
District of Community	TAL.		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2019 FEB - 6 PM 5: 15

(Name of Corporation	as currently filed wit	h the Florida Dept. (of State)
Interlake Apartent Association Inc.			TALLAMA SEE, FL
(Docur	nent Number of Corpor	ration (if known)	
Pursuant to the provisions of section 617.1006, Flo nmendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Flori</i>	da Not For Profit Co.	rporation adopts the following
A. If amending name, enter the new name of the	e corporation:		
		·	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		corporated" or the ah	shreviation "Corp," or "Inc."
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			
	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
D. If amending the registered agent and/or regineration is new registered agent and/or the new register		n Florida, enter the i	name of the
Name of New Registered Agent:	Brian Braddock		
New Registered Office Address:		(Florida street ac	ldress)
www.kgsayen Synce nauress.	412 Lake Clay Dr. S		33852-9349
	(City)		Florida (Zip Code)
New Registered Agent's Signature, if changing I Thereby accept the appointment as registered agen		ind accept the obligat	ions of the position.
	Bn.	Down	M
-	Signature of i	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	\underline{V} Mik	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	Patricia Furnival	408 Lake Clay Dr. S
Add			Lake Placid, Florida 33852-9349
X Remove			
2) Change		Brian Braddock	412 Lake Clay Dr. S
XAdd			Lake Placid, Florida 33852-9349
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

L. If amending or adding additional Articular (attach additional sheets, if necessary).	(Be specific)
	•
1- 1.	
	· · · · · · · · · · · · · · · · · · ·
	

January 28,02019	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Fabruary 3, 2019	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	ı
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 Fabruary 3, 2019	
Signature to comment to the	
(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)	
Raymond Keyes	
(Typed or printed name of person signing)	
President	
(Title of person signing)	