(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(0.0,0000000000000000000000000000000000
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:





700312031057

04/19/18--01007--019 **35.00

S TALLENT APR 20 2018

19 APR 19 PH 2: 35

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	SSOCIATION INC			·
722086 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
DONALD MARTENEY				
	(Name of Contact Person	ı)		· · · · · · · · · · · · · · · · · · ·
HIDDEN RIVER ASSOCIATION INC				
	(Firm/ Company)			
3468 HIDDEN RIVER RD				
	(Address)			
SARASOTA, FL 34240				
	(City/ State and Zip Code	:)		
HIDDEN.RIVER@YMAIL.COM				✓
E-mail address: (to be used	for future annual report r	otification	1)	
For further information concerning this matter, please	call:			
DONALD MARTENEY	94) at	I	928-3385	
(Name of Contact Person		ea Code)	(Daytime Teleph	one Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of	State:	
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee cate of Status fed Copy tional Copy seed)	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations		n of Corpo		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Flo	orida Dept. of State)	
722086			
(Document Nun	nber of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ntes, this <i>Florida Not F</i>	or Profit Corporation adopts the following	
A. If amending name, enter the new name of the corpora	ation:		
		The new	
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	Α	ed" or the abbreviation "Corp." or "Inc."	
(Principal office address <u>MUST BE A STREET ADDRES:</u>	<u>(2</u>		
N/A			
11/7			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u></u>	هَ الله	
		,A 2	
N/A		987 Za	
		7,2	
D. If amending the registered agent and/or registered of		, enter the name of the	
new registered agent and/or the new registered office	address:		
N/A Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:			
		Florida	
,	(City)	Florida (Zip Code)	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am j		ot the obligations of the position.	
	Signature of New Regi	stered 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>Mi</u>	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	MENGER, JR, CHARLES C	3674 HIDDEN RIVER RD
Add			SARASOTA, FL 34240
Remove			
2) Change	<u>v</u>	NEUMANN, JORGE	4334 HIDDEN RIVER RD
X Add			SARASOTA, FL 34240
Remove			
3) Change	P	ALTOMARE, EDMOND J	2900 HIDDEN RIVER RD
Add			SARASOTA, FL 34240
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	
		-
		·
		· · · · · ·

	date of each amend this document was s	nent(s) adoption:		, if other than the
Effe	cctive date <u>if applica</u>	le:		
			days after amendment file date)	
		in this block does not meet the app on the Department of State's recor	plicable statutory filing requirements, this date will not b	e listed as the
Ado	option of Amendme	(s) (<u>CHECK ONE</u>)		
	The amendment(s) was/were sufficient		nd the number of votes cast for the amendment(s)	
	There are no memb adopted by the boa		ne amendment(s). The amendment(s) was/were	
	Dated	4/14/2018		
	Signature _	Josh		_
			the board, president or other officer-if directors orator — if in the hands of a receiver, trustee, or nat fiduciary)	
		JORGE NEUMANN		
		(Typed or	r printed name of person signing)	
		VICE PRESIDENT		
			(Title of person signing)	