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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	R SOUTH NO. II CO	NDOMINIU.	MASSOCIATION, INC.
DOCUMENT NUMBER:	<u> </u>		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Mark A. Bossio Jr			
	(Name of Contact Pers	son)	
HERITAGE MANOR SOUTH NO. II CONDOMINI	UMASSOCIATION, I	NC.	
	(Firm/ Company)		
1151 S Loop Blvd			
	(Address)		
Lehigh Acres, FL 33936			
	(City/ State and Zip Co	ode)	
heritagemanorsouth2@gmail.com			
E-mail address: (to be used	for future annual repor	rt notification	1)
For further information concerning this matter, please	call:		
Mark Bossio Jr	at	05	814-8271
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida De	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & 1 Certificate of Status		Certifi Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis The (t Address adment Section of Corpo Centre of Ta N. Monroe	rations

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



2022 JUL 26 AH 8: 23

HERITAGE MANOR SOUTH NO. II CONDOMINIUMASSOCIATION, INC.

(Name of Corporation as currently filed with th	e Florida Dept. of State)	31
729585		31
(Docum	ment Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	1 "corporation" or "incorporated" e.	The new or the abbreviation * Corp " or "Inc
B. Enter new principal office address, if applica	ible:	
(Principal office address MUST BE A STREET A	(DDRESS) Lehigh Acres, FL	
	33936	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>) P.O. Box 354	
	LEHIGH ACRES, FL 33	3970-0354
D. If amending the registered agent and/or registered agent and/or the new register	stered office address in Florida, en ed office address:	iter the name of the
Name of New Registered Agent:	Mark A. Bossio Jr	
	1151 S Loop Blvd	
New Registered Office Address:	(Floria	la street address)
	Lehigh Acres	, Florida 33936
	(City)	(Zip Code)
New Registered Agent's Signature, if changing For the hereby accept the appointment as registered agent	legistered Agent: I am familiar with and accept the	obligations of the position.
	MAB.	1
	Signature of New Registered	Assent, 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 us 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>Mil</u>	n Doe te Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>× Change</u> Add Remove	<u>P/D</u>	Mark A. Bossio Jr	Lehigh Acres, FL 33936
2) Change Add	V	Matthew Grissom	1143 S Loop Blvd Lehigh Acres, FL 33936
Remove 3) Change Add Remove	<u>T/D</u>	Chris Hebert	Lehigh Acres, Ft. 33972
4) Change * Add	<u>S</u>	Tara Tourangeau	Lehigh Acres, FL 33936
Remove 5) Change Add × Remove	Title Ad	Bennett, Arline L	P.O. BOX 354 LEHIGH ACRES, FL 33970-0354
6) Change Add	Title Cor	Ryan, Todd P.	P.O. Box 354 LEHIGH ACRES, FL 33970-0354
K. If amending or add (attach additional sh	ling additional A eets, if necessary	articles, enter change(s) here:). (Be specific)	
			

Harris La		· -
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The date of each amendment(s) adoption date this document was signed.	ŧ	, if other than the
Effective date if applicable:	no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not 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 membadopted by the boar	pers or members entitled to vote on the amendment(s). The amendment(s) was/vird of directors.	vere
Dated _	7-26->	
Signature∠	Mr Hall	
(1	By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator — if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	tors , or
	Mark A. Bossio Jr	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	