745 754

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

Office Use Only



100333105161

08/46/19--01020--007 **35.00

SCORE MARY OF STATE

AUG 2 C 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Sandtree Homeowner ON:	s Association, Inc.		
DOCUMENT NUMBER:	59-2044022			
The enclosed Articles of Art	nendment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Alex Milano				
	(Name of Contact Person	on)	
Onalim Property Manageme	ent			
		(Firm/ Company)		
4733 W Atlantic Ave, Suite	18			
		(Address)		
Delray Beach, FL 33445				
	(City/ State and Zip Co-	de)	
Alex@onalimpropertymana	gement.com			
Б	-mail address: (to be used	for future annual report	notification	1)
For further information conc	terming this matter, please o	all:		
Alex Milano		5 at	61	367-5448
	(Name of Contact Person)		Arca Code)	(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	able to the Florida Dep	partment of	State:
■ \$35 Filing Fcc	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status icd Copy tional Copy is osed)
Mailing A	address	Stree	t Address	

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

	of	CH ED
5 . 11 . 11	0	1
Jandtree Home	0 whers	Association, Ir
(Name of Corporation as co	irrenay med with the riori !	da Dept. and States 16 P 3 55
745754	<u> </u>	- STATE
(Document N	Number of Corporation (if kn	own) SECRETARY OF STATE TALLAHASSEE: FLORIDA
suant to the provisions of section 617.1006, Florida Sendment(s) to its Articles of Incorporation:	statutes, this Florida Not For	Profit Corporation adopts the following
If amending name, enter the new name of the corp	ooration:	
		The new
ne must be distinguishable and contain the word "corempany" or "Co." may not be used in the name.	rporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable:		
ncipal office address <u>MUST BE A STREET ADDR</u>	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
If amending the registered agent and/or registered	l office address in Florida.	enter the name of the
new registered agent and/or the new registered of		
Name of New Registered Agent:		
Mane of New Registered Agent.		
	, LT ₁	- I - draw a dilawa
New Registered Office Address:	(110	rida street address)
-		
	(City)	, Florida (Zip Code)
	(Ciiv)	(Zip Code)
Registered Agent's Signature, if changing Regist		
reby accept the appointment as registered agent. 1 o	am familiar with and accept t	he obligations of the position.
	Signature of New Registe	ered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 Doc ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Denise Scarlett	911 Sandtree Dr
Add			Palm Beach Gardens
x Remove			FL, 33403
2) Change	VP	Kristen Soles	319 Sandtree Dr
X Add			Palm Beach Gardens
Remove			FL, 33403
3) Change			
Add			
Remove			
4) Change			
Add			
Rетюче			
5) Change			
Add			
Remove			
6) Change		<u> </u>	<u> </u>
Add			
Remove			

	If amending or adding additional Articletach additional sheets, if necessary).	(Re specific)
	(anach daamena sheets, ij neeessary).	(ise specific)
		<u> </u>
_	· 	
_		
		
		-
	•	
	·	

The	date of each amer	dment(s) adoption:	, if other than the
date	this document was	signed.	
Effe	ective date <u>if appli</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requiremente on the Department of State's records.	ents, this date will not be listed as the
Add	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficier	was/were adopted by the members and the number of votes cast for the for approval.	ne amendment(s)
	There are no mem adopted by the bo	pers or members entitled to vote on the amendment(s). The amendment of directors.	nt(s) was/were
	Dated	8/5/2019	
	Signature	(By the chairman of the board, president or other offi	icer-if directors
		have not been selected, by an incorporator – if in the hands of a receive other court appointed fiduciary by that fiduciary)	
		JUHN MEHALKO	
		(Typed or printed name of person signing))
		PAES.	
		(Title of person signing)	