## 747218

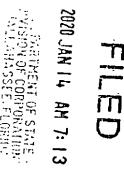
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FEB 11 2020 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

HALIFAX SHORES I NAME OF CORPORATION:		OCIATION.	. INC.
747218 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm			
Please return all correspondence concerning this matter	to the following:		
Frank Monaco			
(	Name of Contact Perso	on)	
	(Firm/ Company)		
PO Box 211285			
	(Address)		
Augusta, GA 30917			
(1	City/ State and Zip Co	de)	
halifaxshorestreasurer@gmail.com			
E-mail address: (to be used to	or future annual repor	t notification	)
For further information concerning this matter, please of	alt:		
Frank Monaco	at	06	414-0901
(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida De	partment of S	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	343.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amer Divis	t Address adment Section of Corpo Centre of Ta	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

HALIFAX SHORES HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florid 747218	M Dept. W Sauce
	mber of Corporation (if known)
· · · · · · · · · · · · · · · · · · ·	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> .	<u>SS</u> )
	720
	2020 JAN
	L DA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maining dualess mat be A 1 out of free box)	MCX MCA
	Right <b>a</b>
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	<u>re address:</u>
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
<del></del>	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent: 1 familiar with and accept the obligations of the position.
	Signature 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: XChange X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	ones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>V</u>	Austin Patterson	3302 MLK Jr. Avenue SE Washington, DC 20032
× Remove			
2) Change Add	<u>V</u>	Kimberly Kosterno	10825 Beverly Ct Clermont, FL 34711
Remove  3 ) Change  × Add  Remove	<u>S</u>	Melissa Parlette	1905 Harlock Rd Melbourne, FL 32934
4) Change Add	<del></del>		
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add	·····		
Remove  E. If amending or additional sheet	ng additional Art ets, if necessary).	Page 2 of 4 icles, enter change(s) here: (Be specific)	
			<del>-</del>

Page 3 of 4  The date of each amendment(s) adoption:  Out 7, 2019						
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The date of each amendment(s) adoption:  Oct 7, 2019						
Effective date if applicable:  (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 not be listed as the			Page 3 of 4			
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	document's effective date on the Departmer	nt of State's records	s.			
Adoption of Amendment(s) (CHECK ONE)	Adoption of Amendment(s)	( <u>CHECK ONE</u> )				

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 members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	Jan 9, 2020 Dated				
	Signature  (By the charman or vice chairman of the board, president or other officer-if di have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)				
	Frank Mor	,			
		(Typed or printed name of person signing)			
	Treasurer				
		(Title of person signing)			