# 747485

(Requestor	r's Name)
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document	t Number)
Certified Copies	Dertificates of Status
Special Instructions to Filing C	Officer:
<u> </u>	





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mylen

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION Greenwood	Lakes Homeowner's	Association. Inc, Unitl
DOCUMENT NUMBER: 74 74 85	· · · · · · · · · · · · · · · · · · ·	<del></del>
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning-this matt	er to the following:	
Judy Cramer (Name of	Contact Person)	
Greenwood Lakes Hom (Firm	eowner's Association (Company)	Inc, Unit1
P.O. Box 9500	193	
Lake Mary, F/3.		
Judy Judy Judy E-mail address: (to be used	6 Cfl. rr. Com Tor future annual report notification	on)
For further information concerning this matter, please	call:	
Judy Crame ~ (Name of Contact Person)	at ( <u>407</u> ) <u>324</u> - (Area Code & Daytime	
Enclosed is a check for the following amount made pa	yable to the Florida Department o	f State:
\$35 Filing Fee \$\ Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copyis enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Mailed

RECEIVED

11 JUL -5 AM 8: 12

## FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations

TALLAHASSEE, FLORIDA

June 27, 2011

JUDY CRAMER P.O. BOX 950293 LAKE MARY, FL 32746

SUBJECT: GREENWOOD LAKES HOMEOWNERS' ASSOCIATION, INC., UNIT

Ref. Number: 747485

We have received your document for GREENWOOD LAKES HOMEOWNERS' ASSOCIATION, INC., UNIT 1 and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 811A00015469

### **Articles of Amendment**

to

A	rtic	les	of	In-	co	rpe	ora	tio	П
			•		•••	- Р	· ·		-

	of	1. T. 11.41
Oreenwood Lax	15 HOMEOWNES 155 tly filed with the Florida Dept. of S	ociation, Incounitl
(Name of Corporation as curren	tly filed with the Florida Dept. of S	<u>tate</u> )
(Dogument Nuch	er of Corporation (if known)	
(Document Numo	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Income		Profit Corporation adopts
A. If amending name, enter the new name of t	he corporation:	
The new name must be distinguishable and con abbreviation "Corp." or "Inc." "Company" or	tain the word "corporation" or "in "Co." may not be used in the name.	corporated" or the
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET		# P**
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	TILE -5
		FLOAM S
		A. O
D. If amending the registered agent and/or reg new registered agent and/or the new register		nter the name of the
Name of New Registered Agent:		<del>,,,, _</del>
<u>New Registered Office Address:</u>	(Florida street address)	
<del></del>	(City)	, Florida (Zip Code)
	(Cuy)	(Lip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.		ept the obligations of the

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
UD	Laura Ballard Kurt Jennings	212 Dublin In.	
Ŋ	Hunt Jannings	292 Duhlin Dr.	
<u> </u>	<u>n ari 0 zinings</u>	Late Mary, F1 32746	Add Remove
		· ·	
			Remove
E. <u>If ame</u>	nding or adding additional Articles, ente	<u>er change(s) here</u> :	
(attach	additional sheets, if necessary). (Be spec	cific)	
	1- fet d		
	·		
<del></del> .			<del>,</del>

The date of each amendment(s) a	doption:
Effective date if applicable	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ss.
DatedSignature	Lady Cramer
have not	hairman of vice chairman of the board, president or other officer-if directors been selected, by an incorporator — if in the hands of a receiver, trustee, or art appointed fiduciary by that fiduciary)
<del></del>	Tudy Crame~  (Typed or printed name of person signing)
	Treasure ~  (Title of person signing)