# 748740

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bı	usiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700210827827

08/23/11--01009--010 \*\*35.00



And All

#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Lakewood	Garden Communit	y Association, Inc.
DOCUMENT NUN	MBER: 748740		
The enclosed Article	es of Amendment and fee are sub	mitted for filing.	
Please return all con	respondence concerning this matt	er to the following:	
	Patricia	O'Shea Contact Person)	
	(Name of	Contact Person)	·
	(Film)	/ Company)	
	`	• • •	
	116 W. Wildwa		
	(1	Address)	•
	· · · · · · · · · · · · · · · · · · ·	0.01.13	
	(City/Star	33612 te and Zip Code)	
	(4.9)		
		2 yahoo, com	•
	E-mail address: (to be use	d for future annual report notific	cation)
For further informat	ion concerning this matter, please	e call:	
Pat 0	e of Contact Person)	at (813) 960- (Area Code & Dayti	-8422
(Nam	e of Contact Person)	(Area Code & Dayti	ime Telephone Number)
Enclosed is a check	for the following amount made p	ayable to the Florida Departmen	nt of State:
\$35 Filing Fee	☐ \$43.75 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 Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2011

PATRICIA O'SHEA 116 W. WILDWOOD TAMPA, FL 33612

SUBJECT: LAKEWOOD GARDEN COMMUNITY ASSOCIATION, INC.

Ref. Number: 748740

We have received your document for LAKEWOOD GARDEN COMMUNITY ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE COMPLETE THE FORM IN ITS ENTIRETY.

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).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 711A00019796

11 SEP -2 AM 8: 06
SEGNETARY OF STAR

#### Articles of Amendment to, Articles of Incorporation of

(Name of Corporation as currently			
7 4 8 7 4 0 (Document Number of Corporation (if known)			
ursuant to the provisions of section 617.1006, Floring to the following amendment(s) to its Articles of Incorporate If amending name, enter the new name of the	oration:		ofit Corporation addi
he new name must be distinguishable and contain bbreviation "Corp." or "Inc." <u>"Company" or "C</u> e			porated" or the
Enter new principal office address, if applicable incipal office address MUST BE A STREET AL		16 W. Will Tampa, FL	33612
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80x</u> )	116 W. Wild Tampa, FL	
If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent:			r the name of the
Nume of New Registerea Agent.	• •		
New Registered Office Address:	(Flori	da street address)	
·			, Florida
		(City)	(Zip Code)
ew Registered Agent's Signature, if changing Resistereby accept the appointment as registered agentistion.			the obligations of t
Simut	ture of New	Registered Agent, if chang	zina

Page 1 of 3

### 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) Type of Action <u>Address</u> Title <u>Name</u> BD Brown, Beverly 11824 N. Armenia | Add Dick, Convie Annette Cusmano 46 38 E. Eastwind Dr. Add Plant City, FL 33566 □ Remove BD E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

## 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	Address	Type of Action
T	Patricia OShea	116 W. Wildwood Tampa, FL 33613	Add  Remove
<u> </u>	Dick, Consie	(1824 N. Armenia Tompa, FL 33612	Add Remove
			Add Remove
E. <u>If amend</u> (attach ad	ing or adding additional Articles, enter ditional sheets, if necessary). (Be specif	<u>change(s) here</u> : îc)	
	<del></del>	į.	
		······································	· · · · · · · · · · · · · · · · · · ·
	<del></del>		<del></del>
			<u>,                                      </u>

The date of each amendment(s) ad	lantion: 8/15/11
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated 8/c	Patricia Afea
(By the c	hairman or 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 at appointed fiduciary by that fiduciary)
_	Patricia O'Shea
,	(Typed or printed name of person signing)
	(Title of person signing)

Page 3 of 3