# 75552

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

Office Use Only



600254063686

11/25/13--01032--004 \*\*35.00



Amend 10/2/13

#### **COVER LETTER**

TO: Amendment Section Division of Corporations Lake And Hills Country Estates Property Owners Association, Inc. NAME OF CORPORATION: 755552 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carol D Lamons (Name of Contact Person) Lake And Hills Country Estates Property Owners Association, Inc. (Firm/ Company) 2300 29th St NW (Address) Winter Haven FL 33881 (City/ State and Zip Code) ftr.cdl@verizon.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carol D Lamons (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

**Articles of Incorporation** 

#### Lake And Hills Country Estates Property Owners Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) 755552

(Document Number of Corporation (if known)

South Constitution of the Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following

amendment(s) to its Articles of Incorporate	ion:		
A. If amending name, enter the new na	me of the corporati	on:	
			The nev
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the abbre	eviation "Corp." or "Inc."
B. Enter new principal office address, (Principal office address MUST BE A ST			
· · · · · · · · · · · · · · · · · · ·	,		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		OOOO OOH CANIM	
		2300 29th St NW	
		Winter Haven FL 338	<u> 881-1102</u>
D. If any all the state of the state of	16	11 1 11 11 11	6.11
D. If amending the registered agent an new registered agent and/or the new			ne of the
Name of New Registered Agent:	Carol D Lar	nons	
	2300 29th \$	St NW	-
		(Florida street address)	-
New Registered Office Address:			00004 4400
	Winter Hav	<b>en</b> , Florida	33881-1102
	(City)		(Zip Code)
New Registered Agent's Signature, if cl			Cat to
I hereby accept the appointment as regist	erea agent. Tam fa	milar with and accept the obligation	s of the position.
_ <u>`</u> `	Signature of Nam	Registered Agent, if changing	ø

Page 1 of 4

### 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: X.Change X.Remove X.Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	<u>P</u>	Wayne Privett	8912 Lighter Knot Dr
Add Remove			Lake Wales FL 33898
2) X Change	<u>P</u>	Dave Parrish	8928 Lighter Knot Dr
Add			Lake Wales FL 33898
Remove 3)ChangeAdd	<u>T</u>	Judith Walker	114 Aspen Circle Seminole FL 33777
Remove  4) Change  X Add	<u>D</u>	Carol D Lamons	2300 29th St NW Winter Haven FL 33881-1102
Remove  5) Change  X Add	<u>s</u>	Marshall Boudreaux	8924 Lighter Knot Dr Lake Wales FL 33898
Remove 6)ChangeAddRemove			

If amending or addi attach additional she	ets, if necessary).	(Be specific)			
			<u> </u>		
<u> </u>					<del></del>
			···		
•					
1					
-					
		<del></del>			
,					
	-				
<u>.                                    </u>					
<del>-</del>	. <u>.</u>			<del> </del>	

The	date of each amendment(	(s) adoption: 11/22/2013	, if other than the		
date	ate this document was signed.  Ciffective date if applicable:  11/01/13				
		(no more than 90 days after amendment file date)	_		
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )			
	The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.			
	There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.			
	Dated Signature	11/20/13			
	(By the have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)			
	Carol D	Lamons			
	<del></del>	(Typed or printed name of person signing)			
	Director	r			
		(Title of person signing)			