## 757180

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1001 10 PH 3: 50 TO: Amendment Section Division of Corporations Lake Villas Q and R Homeowners Association, Inc. NAME OF CORPORATION: 757180 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Norma Jane Craig (Name of Contact Person) Lake Villas Q and R Homeowners Association, Inc. (Firm/ Company) 4 Lake Villa Way (Address) Kissimmee, Florida 34743 (City/ State and Zip Code) lake\_villas@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Norma Jane Craig 472 5813 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □S52 50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

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 Gircle Tallahassee, FL 32301

(Additional Copy is Enclosed)

## Articles of Amendment to Articles of Incorporation of



Lake Villas Q and R Homeowners Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 757180 (Document Number of Corporation (if known) 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 Incorporation: A. If amending name, enter the new name of the corporation: Non Applicable name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. Non Applicable B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: Non Applicable (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Non Applicable Name of New Registered Agent: (Florida street address) New Registered Office Address: Non Applicable , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

address of each Offic (Attach additional she Please note the officer P = President; V= Vic	er and/or Dets, if necess director title e President O = Chief F	Director being added: sary) le by the first letter of the office title ; T = Treasurer; S= Secretary; D = Direc inancial Officer. If an officer/director h	} ctor; TR= Tru	stee: C = Chairman or Clerk; CEO = Chief in one title, list the first letter of each office
a change, Mike Jones	leaves the c			PST and Mike Jones is listed as the V. There is hould be noted as John Doe. PT as a Change.
Example: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		-
Type of Action (Check One)	Title	<u>Name</u>		Address
I) Change	P	Mary Wilson		4 Lake Villa Way
Add				Kissimmee, Florida 34743
X Remove				
2) Change	S/T	Fernando Santana	!	4 Lake Villa Way
Add				Kissimmee, Florida 34743
X Remove	P	Norma Jane Craig		4 Lake Villa Way
3 ) X Change				Kissimmee, Florida 34743
Remove				
4) Change	VP	Ronald Rosado		4 Lake Villa Way
X Add		_		Kissimmee, Florida 34743
Remove				
5) Change	S/T	Carmen Perez Suarez		4 Lake Villa Way
X Add				Kissimmee, Florida 34743
Remove			!	
6) Change	VP	Rebecca Sue Clemmer		4 Luke Villa Way
Add				Kissimmee, Florida 34743
X Remove				

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)		
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	Non Applicable	
The date of each amendmen late this document was signe		, if other than the
	Non Applicable	•
Effective date <u>if applicable</u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were sufficient for	(were adopted by the members and the number of votes east for the amendment(s) approval.	
There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
Sep Dated	tember 6, 2017	
Signature	Jerne Jane Chaig	
have	he chairman or vice chairman of the board, president of other officer-if directors a not been selected, by an incorporator – if in the hands of a receiver, trustee, or a court appointed fiduciary by that fiduciary)	
1	Norma Jane Cruig	
_	(Typed or printed name of person signing)	
F	President	
_	(Title of person signing)	