758347

(R€	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Magnolia Basin H NAME OF CORPORATION:	lomeowners Association, In	¢.	
758347 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are st	abmitted for filing.	· ·	
Please return all correspondence concerning this ma	atter to the following:		
Debra Harmon			
	(Name of Contact Perso	n)	
	(Firm/ Company)		
7 Captain Parker Drive			
	(Address)		
Lee, NH 03861			
	(City/ State and Zip Cod	e)	
debbie@harmon1.org			
E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, plea-	se call:		
Debra Harmon	at	6039884105 at	
(Name of Contact Person	on) (A.	rea Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	& □\$43.75 Filing Fee & Sertified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2018

DEBRA HARMON 7 CAPTAIN PARKER DR LEE, NH 03861

SUBJECT: MAGNOLIA BASIN HOMEOWNERS ASSOCIATION, INC.

Ref. Number: 758347

We have received your document for MAGNOLIA BASIN HOMEOWNERS 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):

This is a Non-profit corporation the document you sent in is for a Profit corporation.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 418A00014677

Articles of Amendment to Articles of Incorporation of



2818 JUL 27 A 11: 44 MAGNOLIA BASIN HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 758347 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: Name of New Registered Agent: (Florida street address) New Registered Office Address: _. Florida ___ (Zip Code) (City) 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

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>N</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	John Haynes	15007 Innerarity Point Road
			Pensacola, FL 32507
Add X Remove			
2) Change	P	Peter Harmon	7 Captain Parker Drive
X Add			Lee, NH 03861
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	2		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
	
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The date of e	each amendment(s) adoption:	, if other than the
date this docu	ument was signed.	
	08 July 2018	
Effective dat	te <u>if applicable</u> :	·
	(no more than 90 days after amendment file date)	
	date inserted in this block does not meet the applicable statutory filing requirements, this effective date on the Department of State's records.	date will not be listed as the
Adoption of	Amendment(s) (<u>CHECK ONE</u>)	
	endment(s) was/were adopted by the members and the number of votes cast for the amend re-sufficient for approval.	lment(s)
	re no members or members entitled to vote on the amendment(s). The amendment(s) was I by the board of directors.	/were
	08 July 2018 Dated	
	Signature Dobia Harrion	
	(By the chairman 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)	
	Debra Harmon	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	