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11/19/20

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Garden Hills Home owners Association Inc
DOCUMENT NUMBER: 76/282
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Garden Hills Home Dwners Association Inc
(Firm/ Company)
5331 Mendoza ST.
(Address)
West Palm Beach 33415 (City/State and Zip Code)
·
ghhoa @ comcast. net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert De La Cruz at S61-509-4162 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Garden Hills Home C)wner	Associat	7'On,	2020 OCF 13	PM 5: 22
Name of Corporation as currently filed with the					
76/282				SECRETARY TALLAHAS	OF STATE
(Docume	ent Number of	Corporation (if knows	1)		
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes, thi	s Florida Not For Pr	ofit Co rp	oration adopts the	e following
A. If amending name, enter the new name of the	corporation:				
NIA					The new
NA name must he distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation"	or "incorporated" or	the abbr	eviation "Corp."	or "Inc."
B. Enter new principal office address, if applicab	ole: -	5331 M	endo	za St	-
(Principal office address <u>MUST BE A STREET AI</u>	DDRESS)	5331 <u>M</u> c W.P.B 71	′ 33	3415	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u> </u>	5331 Me. P.B. 71	ndoz. 339	a ST.	-
D. If amending the registered agent and/or regist new registered agent and/or the new registere	d office addre	ss:			
Name of New Registered Agent:	KOŁ	er/ De	La	Cruz	
Name of New Registered Agent: New Registered Office Address:	_533	l Mendo (Florida	Z A street addr	<u>s:</u> †	
	W.P.L	3 7/ i(y)		_, Florida <u>33</u> (Zip Code)	3415
New Registered Agent's Signature, if changing Relation of the Agent the Appointment as registered agent.			obligation	as of the position.	
X <	Siehan	re 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>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Rubert De la Cruz	5257 Mendoza ST W.P.B. 71 33415
Remove 2) Change Add	P	Yolanda Silva	5274 Mendosa ST W.P.B. 71 33415
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
E. If amending or addi (attach additional she		nal Articles, enter change(s) here: sary). (Be specific)	
		-	· · · · · · · · · · · · · · · · · · ·

		
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The date of each amendment(s) adoption date this document was signed.	n:	if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department.	es not meet the applicable statutory filing requirements ent of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte	by the members and the number of votes east for the a	imendment(s)

was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 10/05/20
Signature (By the chairman or vice chairman of the board, president or other officer-if directors)
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President
(Title of person signing)

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