

761320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

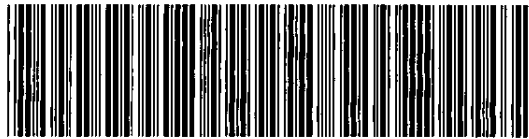
(Document Number)

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04/07/09--01003--019 \*\*96.75

FILED

2009 MAY 12 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amended  
[Signature]

5-15-09



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 30, 2009

AL LOMAS  
SHADY LAKES HOA  
1029 SHADY LAKES CIRCLE  
PALM BEACH GARDENS, FL 33418

SUBJECT: SHADY LAKES HOMEOWNERS' ASSOCIATION, INC.  
Ref. Number: 761320

We have received your document for SHADY LAKES HOMEOWNERS' ASSOCIATION, INC. and check(s) totaling \$96.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

Please complete the enclosed Amendment form to add or change officers, the enclosed annual report cannot be used.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 209A00014561

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SHADY LAKES Home Owner's Association

DOCUMENT NUMBER: 761320

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AL LOMAS

(Name of Contact Person)

SHADY LAKES HOA - TRESSURE

(Firm/ Company)

1029 SHADY LAKES Circle

(Address)

P.B.G. FL. 33418-3554

(City/ State and Zip Code)

For further information concerning this matter, please call:

AL LOMAS

(Name of Contact Person)

at ( 561 ) 358-7562

(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 &  
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)

**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  
to  
Articles of Incorporation  
of

Shady Lakes Homeowners Association, INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

761320  
(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:

The new 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.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

Beverly Gregson  
3335 Pine Hill TRAIL  
P.B.G FL. 33418

C. Enter new mailing address, if 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:

Name of New Registered Agent:

AL Lomas

New Registered Office Address:

1029 SHADY LAKES Circle  
(Florida street address)

P.B.G.

(City)

Florida

FL

(Zip Code)

33418

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]  
Signature of New Registered Agent, if changing

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*(Attach additional sheets, if necessary)*

Registered  
Agent

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: 5-7-09

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(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 5/7/09

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)

AL Lomas

(Typed or printed name of person signing)

TREASURER

(Title of person signing)