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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Fox Meadow Home Owners Association of Ocala, inc
DOCUMENT NUMBER: 76/507
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)
VINE MANAGEMENT OF DCALA, LLC. (Firm/Company)
P.D. Box 3305 (Address)
(Address)
BELLEVIEWS FL 24421
BELLEVIEW, FL 34421 (City/ State and Zip Code)
VINE MANAGEMENT OCH LA GENAL COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 350- 425-2979  (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:
S35 Filing Fee S43.75 Filing Fee Scripting Fee Certificate of Status (Additional copy is enclosed)  Mailing Address Amendment Section Division of Corporations  Street Address Amendment Section Division of Corporations  Street Address Amendment Section Division of Corporations  Signature  Certificate of Status Certified Copy (Additional Copy is Enclosed)  Street Address Amendment Section Division of Corporations
Mailing Address Amendment Section Division of Corporations  Street Address Amendment Section Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



December 11, 2015

LOUIS J. GAHR P.O. BOX 3305 BELLEVIEW, FL 34421

SUBJECT: FOX MEADOW HOME OWNERS ASSOCIATION OF OCALA, INC Ref. Number: 761507

We have received your document for FOX MEADOW HOME OWNERS ASSOCIATION OF OCALA, 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):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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.

Letter Number: 915A00026002

Carol Mustain Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation

(Document Number of Corporation (if known)  Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the foamendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  Tham must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "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)  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 address:  Name of New Registered Agent  New Registered Office Address:	he new
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, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
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.

X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>se Jones</u>	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	I	CAROLYN KING	3618 NE 17th Lane
Add		,	OCALA FL 34470
Remove			
2) Change	<u>P</u>	SCOTT BINEGAR	3711 NE 16th PLACE
Add			OCALA FL 34470
Remove			
3) X Change	<b>√</b>	KENNETH GREEN	3705 NE 17th STREET
Add			OCALA FL 34470
Remove			
4) X Change	I	Joanne PANCOAST	3614 NE 16th PLACE
Add	·		OCALA FL 34470
Remove			
5) Change	D	DOUGLAS HOOP	3705 NE 16th PLACE
Add			OCALA FL 34470
Remove			
6) X Change	5	Teddy Laury	3612 NE 161 PLACE
Add		[	OCALA FL 34470
Remove			

famentling or additional Articles, enter change(s) here:  httach additional sheets. If necessary). (Be specific)		<i>‡</i>
A 3	If amending or adding additional Arti	cles, enter change(s) here:
	(aitach additional sheets, if necessary).	(Be specific)
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The date of éach amendment(s) adop	tion: 11/18/15	, if other than the
date this document was signed.	1.77.071.0	, it office that the
Effective date <u>if applicable</u> :	11/18/15	
	(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block document's effective date on the Depar		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	*
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of vot	es cast for the amendment(s)
There are no members or member adopted by the board of directors.	s entitled to vote on the amendment(s). Th	ne amendment(s) was/were
Dated 12/3	<del>'</del> '	
	A. Binegar	
have not been	on or vice chairman of the board, president selected, by an incorporator – if in the hand pointed fiduciary by that fiduciary)	
	C.TT A Binegar (Typed or printed name of per	son signing)
	( )	
* <u>P</u>	resident Fox Mea (Title of person sig	dow HOA
	(Title of person sig	gning)