762005

(Requ	uestor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: SOUTH GULI	F COVE HOMEOWN	ERS ASSN., INC.
DOCUMENT NUN	ивек: <u>762005</u>	.,	,, , , ,
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this mat	tter to the following:	
	KAREN IREL	AND, SECRETARY	
-	(Name o	f Contact Person)	
	SOUTH GULF COVE	HOMEOWNERS ASSN.	, INC.
	(Firm	n/ Company)	
	РО	BOX 977	
	(Address)	
		, FL 33946-0977	
	(City/ Sta	te and Zip Code)	
	E-mail address: (to be use	ed for future annual report not	ification)
For further informati	ion concerning this matter, pleas	e call:	
KAREN IRELAN	D, SECRETARY	at (941) 697-	7523
(Name	e of Contact Person)	(Area Code & Da	aytime Telephone Number)
Enclosed is a check	for the following amount made p	payable to the Florida Departr	ment 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)
	ling Address	Street Address	ŕ
	endment Section	Amendment Section Division of Corpo	
	sion of Corporations Box 6327	Clifton Building	rations
	ahassee, FL 32314	2661 Executive C	enter Circle

Tallahassee, FL 32301

Articles of Amendment	
to	
Articles of Incorporation 09	m 'ED
of	VC1, 70
SOUTH GULF COVE HOMEOWNERS ASSN., INC. ALL ALL	MARY AM 8:36
(Name of Corporation as currently filed with the Florida Dept. of State)	ASSEF OF STA
762005	- FLORIDA

(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:

Enter new principal office address, if a incipal office address <u>MUST BE A STR</u> i		· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)			
	.,		·
· · · · · · · · · · · · · · · · · · ·		in Florida, en	ter the name of the
If amending the registered agent and/o new registered agent and/or the new re Name of New Registered Agent: New Registered Office Address:			ter the name of the

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
T/D	JOSEPH GIRALDI	8199 CLYDE CIRCLE PORT CHARLOTTE, FL 33981	☐ Add ☑ Remove
T/D	PAMELA CURTIS	9348 SPRING CIRCLE PORT CHARLOTTE, FL 33981	☑ Add ☐ Remove
·			Add Remove
(attach a	ding or adding additional Articles, en additional sheets, if necessary). (Be sp Ell (a) delete [section] "ninety-se	pecific)	ted as residential
	units and was vacated by Gen	eral Development/Atlantic Gulf (Communities.
	Section 97 no longer exists the	erefore should be deleted from the	ne Articles.
ARTICLE	III - MEMBERESHIP add "lot" a	s an additional membership opti	on.
	Bylaw change approved by the	e Membership - February 15, 20	05
ARTICLE	VI - OFFICERS [shall be elected	I by the membership at the annu	ial] "February
		oved by the Membership - Sept	
ARTICLE	VIII - BOARD OF DIRECTORS [
		s 4 directors-at-large." (delete in	
		roved by the Membership - Sept	······································
	producting System energy spp.		
			· · · · · · · · · · · · · · · · · · ·
			

The date of each amendment(s)	adoption: INDICATED AFTER EACH AMENUMENT		
(date of adoption is required)			
Effective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.		
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.		
Dated DECEN	MBER 3, 2009		
Signature	Haren Ireland		
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, court appointed fiduciary by that fiduciary)		
	KAREN IRELAND		
_	(Typed or printed name of person signing)		
	SECRETARY/DIRECTOR		
_	(Title of person signing)		

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