769588

(Re	questor's Name)	
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C. CARROTHERAS

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	S ESTATES OF HI	GHLAND COUNTY, INC.	
DOCUMENT NUMBER: 769588			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
Ruth Ann McCormack			
	(Name of Contact Person	n)	
THE PALMS ESTATES	OF HIGHLAN	ID COUNTY, INC.	
	(Firm/ Company)		
117 DOMINION STRE	ET		
	(Address)		
LORIDA, FL 33857			
	(City/ State and Zip Code	e)	
thepalms@emb	•		
E-mail address: (to be a	used for future annual report	notification)	
For further information concerning this matter, ple	ease call:		
Ruth Ann McCormack	863	655-1909	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount mad	e payable to the Florida Depa	ortment of State:	
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	c. & \$\subset\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$\$\$\$\$\$\$\$ \$\subset\$	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section		Address ment Section	
Division of Corporations	Divisio	Division of Corporations	
P.O. Box 6327		Building xecutive Center Circle	
Tallahassee, FL 32314	2001 E	ACCULIVE CEITER CITCLE	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

THE PALMS ESTATES OF HIGHLAND COUNTY, INC.

14 MAR 19 PM 4:21

(Name of Corporation as currently filed with the Florida Dept. of State)

769588

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

dursuant to the provisions of section 617.1 mendment(s) to its Articles of Incorporation	·	•		•
A. If amending name, enter the new na	me of the corporation	<u>n:</u>		
				The new
ame must be distinguishable and contain Company" or "Co." may not be used <u>in</u>		on" or "incorporated	" or the abbreviati	on "Corp." or "Inc."
. <u>Enter new principal office address, i</u> Principal office address <u>MUST BE A ST</u>		.		
	 ,			
The form of the state of the st	anhla.			
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C				******
	•			
. If amending the registered agent and			enter the name of	the
new registered agent and/or the new				
Name of New Registered Agent:	Ruth Ann M	cCormack		
	117 Dominion	Street, Lorida,	FI 33857	
New Registered Office Address:	(1	Florida street address)		
			, Florida	

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

Page 1 of 4

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>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	APPENZELLAR, RICHARD L	117 DOMINION ST
Add			LORIDA, FL 33857
X Remove			
2) Change	DIR	APPENZELLAR, DEBORAH K	PO 364
Add			LORIDA, FL 33857
X Remove			
3) X Change	D	BAKER, JIM	palms estates rd
Add			LORIDA, FL 33857
Remove			
4) Change	DS	LIPKA, SHIRLEY A	PO 634
X Add			LORIDA, FL 33857
Remove			
5) Change	D	DEAN, JANET	PALMS ESTATES ROAD
X Add			LORIDA, FL 33857
Remove			
O Ch			
6) Change			
Add			
Remove			

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

	e date of each amendment(s) adoption: c this document was signed.	, if other than the
Eff	ective date <u>if applicable</u> : (no more than 90 days after unendment file daye)	_
Ade	option of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	
Ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Signature Ruth and McCornect	
	(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)	
	Ruth Ann McCormack	
	(Typed of printed name of person signing) Treasurer (Title of person signing)	
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