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COVER LETTER

TO: Amendment Section **Division of Corporations** Legacy Place Owners Association, Inc NAME OF CORPORATION: __ N00000001135 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jenny Nelson (Name of Contact Person) Quest Company (Firm/ Company) 1180 Spring Centre South Blvd. Suite 102, (Address) Altalmonte Springs, FL 32714 (City/ State and Zip Code) jenny@questcompany.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jenny Nelson (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filmg Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

20 July 27 My 8. 40 Articles of Amendment Articles of Incorporation Legacy Place Owners Associaton, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N00000001135 (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: N/A "Company" or "Co." may not be used in the name. **Quest Company** B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1180 Spring Centre South Blvd, Suite 102 Altamonte Springs, FL 32714 C. Enter new mailing address, if applicable: Quest Company (Mailing address MAY BE A POST OFFICE BOX) 1180 Spring Centre South Blvd, Suite 102 Altamonte Springs, FL 32714 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: (Florida street address) New Registered Office Address:

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,

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>DP</u>	Frances C Panico	2901 Butterfield Road Oak Brook, IL 60523
 X Remove 2) Change Add 	<u>T. S. D</u>	Ann Marie Syehla	2901 Butterfield Road Oak Brook, IL 60523
X	<u>P</u>	Rick Law	1180 Spring Centre South Blvd, Suite 102 Altamonte Springs, FL 32714
4) Change Add	DV	Kathleen M Corke	2901 Butterfield Road Oak Brook, IL 60523
7 Remove 5) Change Add			
Remove 6) Change Add			
Remove E. If amending or add (attach additional sho		Page 2 of 4 rticles , enter change(s) here: here : (Be specific)	
N/A			
			

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	. N/A	•			
The date of each amendment(s) adop	otion:				, if other than the
date this document was signed.					
Effective date <u>if applicable</u> : N/A					
-	(no more than 9	0 days after an	iendment file da	(e)	
Note: If the date inserted in this block document's effective date on the Depar	does not meet the a	pplicable statu ords.	tory filing requir	rements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ON</u> I	<u>E</u>)			
The amendment(s) was/were adop was/were sufficient for approval.	oted by the member:	and the numb	er of votes cast f	for the amendment(s)	

adopted by the board of directors.
Dated 1/24/2020 Signature Aluman
(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 purson signing)
(Title of person signing)