NOI 000002545

(Re	questor's Name)	
(Ad	idress)	
(Ad	dress)	
(Ĉit	y/State/Zip/Phone	; #)
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

EAGLE'S VIEW C	OMMUNITY ASSOC	IATION, INC	•
N01000002545			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
JENNELL ADAMS			
	(Name of Contact Pe	rson)	
	(Firm/ Company)	
386 SE PRICE CREEK LOOP			
	(Address)		
LAKE CITY FL 32025			
	(City/ State and Zip C	lode)	
jennelladams@comcast.net			
E-mail address: (to be use	d for future annual rep	ort notification	1)
For further information concerning this matter, pleas	e call:		
JENNELL ADAMS	91	386	697-7654
(Name of Contact Person	n)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida D	epartment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	-	Certifi Certifi	cate of Status ed Copy ional Copy is
Mailing Address Amendment Section Division of Corporations	Am	eet Address endment Secti ision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

EAGLE'S VIEW COMMUNITY ASSOCIATION INC.

(Name of Corporation as currently filed with the I	Florida Dept. of State)			
N01000002545				
(Documer	nt Number of Corporation	(if known)		
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Ne</i>	ot For Profit Corpor	ation adopts the	following
A. If amending name, enter the new name of the c	corporation:			
				_The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	corporation" or "incorpo	rated" or the abbrev	iation "Corp."	or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD.				
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u> </u>			-
D. If amending the registered agent and/or registered new registered agent and/or the new registered		rida, enter the name	e of the	
Name of New Registered Agent:				
_				<u></u>
New Registered Office Address:		(Florida street address,	NOTE OF THE PROPERTY OF THE PR	Spring and the spring of the s
	(Ciŋ)		(Zip:Code) =	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and ac	cept the obligations o	of the position.	
	Signature of New Re	gistered Agent, if ch	anging	

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	PT John De V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>D</u>	L.R. LEGUIRE	573 SE NATURE DR LAKE CITY FL 32025
× Remove			
2) Change Add	D		3379 SE CR 245 LAKE CITY FL 32025
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove		- -	
6) Change Add			
Remove			
E. If amending or addin- (attach additional sheet	g additional Artic is, if necessary).	eles, enter change(s) here: (Be specific)	
			
	.,		
			· · · · · · · · · · · · · · · · · · ·

11/6/2020	
The date of each amendment(s) adoption: 11/6/2020 date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days a)	(ter amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
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.

	11/30/2020
Dated	
Signature	Die Collins
£	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)
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary) JENNELL ADAMS