

NO1296

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*None Change
& Amend*

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2012 APR 30 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*DR
5/3/12*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: C.A.V. HOMEOWNERS COOPERATIVE, INC

DOCUMENT NUMBER: NO 1296

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bonne JOHNSTONE

(Name of Contact Person)

CAV HOMEOWNERS COOPERATIVE, INC.

(Firm/ Company)

39333 BLUE SKYE DRIVE

(Address)

LEPHYRHILLS, FLORIDA 33542

(City/ State and Zip Code)

CAV8270@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bonne JOHNSTONE

(Name of Contact Person)

at (813) 782-8270

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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) |
|---|--|---|--|

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

2012 APR 30 AM 10:17

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

C.A.V. HOMEOWNERS COOPERATIVE, INC.

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
1296

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:

CAV HOMEOWNERS COOPERATIVE, INC.

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

PETER SCHAUB

39333 BLUE SKYE DR.

(Florida street address)

New Registered Office Address:

LEPHYRHILLS

(City)

Florida

(Zip Code)

33542

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

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:

☒ Change	<u>PT</u>	<u>John Doe</u>
☒ Remove	<u>V</u>	<u>Mike Jones</u>
☒ Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) ☒ Change ☐ Add ☐ Remove	<u>P</u>	<u>PETER SCHAUB</u>	<u>39249 HOMECREST DR.</u> <u>LEPHYRHILLS, FL</u> <u>33542</u>
2) ☒ Change ☐ Add ☐ Remove	<u>VP</u>	<u>ARTHUR BEAVER</u>	<u>39249 RECESS DR.</u> <u>LEPHYRHILLS, FL</u> <u>33542</u>
3) ☒ Change ☐ Add ☐ Remove	<u>T</u>	<u>VIRGINIA MOOMEY</u>	<u>39236 MAHER DR.</u> <u>LEPHYRHILLS, FL</u> <u>33542</u>
4) ☒ Change ☐ Add ☐ Remove	<u>D</u>	<u>FREDRIC PLANK</u>	<u>6336 BALMY LN.</u> <u>LEPHYRHILLS, FL</u> <u>33542</u>
5) ☐ Change ☐ Add ☐ Remove	_____	_____	_____ _____ _____
6) ☐ Change ☐ Add ☐ Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: APRIL 20, 2012

Effective date if applicable: APRIL 24, 2012
(no more than 90 days after amendment file date)

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.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

Signature

(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)

Peter J. Schaub

(Typed or printed name of person signing)

President

(Title of person signing)