

N020000007657

Willard Fuller

(Requestor's Name)

PO BOX 194

(Address)

(Address)

Lloyd, Fla 32337

(City/State/Zip/Phone #)

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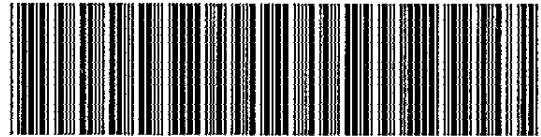
(Business Entity Name)

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LOYD ACRES HOMEOWNERS ASSOCIATION, INC.

DOCUMENT NUMBER: NO 20000007657

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

Please return all correspondence concerning this matter to the following:

WILLARD FULLER
(Name of Contact Person)

(Firm/ Company)

P.O. Box 396
(Address)

LOYD, FL 32337
(City/ State and Zip Code)

For further information concerning this matter, please call:

WILLARD FULLER at (850) 342-1411
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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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

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TALLAHASSEE, FLORIDA

LLOYD ACRES HOMEOWNERS ASSOCIATION, INC.

No2000007657

LLOYD LAKEFRONT HOMEOWNERS ASSOCIATION, INC.

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: MAY 4, 2006

Effective date if applicable: JUNE 4, 2006
(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 was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature Willard Fuller
(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.)

WILLARD FULLER

(Typed or printed name of person signing)

TREASURER

(Title of person signing)

FILING FEE: \$35