

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	 .
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
640	563,4135	14104,2574
	Office Use Or	



800308179388

01/25/18--01002--019 **35.60

FILLED

18 FEB 22 FH 2: H

SLOSLIKATIONS LATE
JALLAHASSES, FLORID

FEB 2.2 2018 ©. YCU.VO



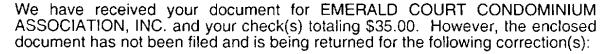
FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2018

LIAM POOL HOMEVEST MANAGEMENT INC. 1300 E MICHIGAN STREET ORLANDO, FL 32806

SUBJECT: EMERALD COURT CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N03000002895



Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

-The-date-of-adoption of each amendment must be included in the document.

∠Please=check=the=appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a <u>PROFIT</u> corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed 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.

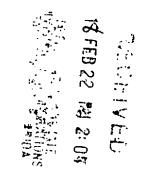
The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 718A00001778



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Emerald Court Cordo Minium Association 12
DOCUMENT NUMBER: N0300002895
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Clam Pool (Name of Contact Person)
GOTO PARTO COMPANY) (Firm/Company)
1300 E. Michigan St
City/ State and Zip Code) Compared Homework. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Liam Pool at 407 655 - 8191 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& Certificate of Status (Additional copy is enclosed) \$\Bigcup \\$52.50 Filing Fee \& Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Emerald Court Conc	Vominium /	Association, Inc	
(Name of Corporation as	currently filed with the	Florida Dept. of State)	 -
M10200000 2895			
(Document)	t Number of Corporation	(it known)	
(Document	t ivalider of Corporation	(ii kilovii)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida No</i>	nt For Profit Corporation adopts the fo	əllowing
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "c	orporation" or "incorpo	rated" or the abbreviation "Corp." or	- "Inc."
"Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)		/: ☆
	·		
C. Enter new mailing address, if applicable:		ASS	11. 2.
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)		
		<u></u>	
		Ş	<u> </u>
			- ∞
D. If amending the registered agent and/or register	ed office address in Flo	rida, 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:			
		, Florida	
	(City)	(Zīp Code)	
		·	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		cent the obligations of the position	
The state of the s	,	says an amagamana at the pointion	
	Signature of New R	egistered 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: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>P</u>	Finkelstein, Andrew	2180 West SR434
Add X Remove			Scirte 5000 Longwood, FL 32779
2) Change	V	Finhelstein, Amarda	2180 Uest SR 434
Add Remove 3) Change	1	Miller, Amenda	Suite Scoo Longered, FL 32779 2160 West SR 434
Add Remove 4) Change Add	<u>P</u> _	Dhama, Harpal	Scrite Saaz Longwood, Fl 32771 S311 Pine lily Gode Winto Pale Fl 32792
Remove	<u> </u>	Zhang, Frank	1621 River BrichAre Oriedo FL 32765
Remove 6) Change Add		Grinsley, Steve	1408 Catherne St Unit C Orlando FL 32801
Remove		D	

Page 2 of 4

<u>lf amendjag or adding additiona</u> Attach <i>additional sheets, if necess</i>	יבי). (Be	e specific)		•				
	·				·			
							-	
					-			
								<u> </u>

f an amendment provides for an provisions for implementing the	exchange	e, reclassifi ent if not c	ication, or	cancellation the amen	<u>n of issued</u> dment itse	shares,		
(if not applicable, indicate N	4)	<u>em mage</u>	outain in Car			<u></u>		
				<u>_</u>		_ <u></u>		
		·						
			·		 .			

The date of each amen	idment(s) adoption:	, if other than the
date this document was		
Effective date <u>if applic</u>	cable: 2/1/2018	
	(no more than 90 days after amendment file date)	
	ted in this block does not meet the applicable statutory filing requirements, this date will nate on the Department of State's records.	or be listed as the
Adoption of Amendme	ent(s) (CHECK ONE)	
☐ The amendment(s) was/were sufficien) was/were adopted by the members and the number of votes east for the amendment(s) at for approval.	
There are no memi adopted by the box	abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
Dated	02/09/2018	
Signature	Harpal Dhama	
١	(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)	
	Harpal Dhama (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person cioning)	