N03000005468

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Paradise Woods Association of Homeownes, INC.
DOCUMENT NUMBER: N0300005468
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mr. Gary Odenweller (Name of Contact Person)
Paradise Woods association of Homeowiers, Inc.
10078 Widden Peacs Cane (Address)
Bouita Springs Fl 34135 (City/State and Zip Code)
Godenveller annual com E-mail address! (to be used for future annual report notification) E-mail address!
For further information concerning this matter, please call:
Cary Odenweller at 630-452-5505 3 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

TO: Amendment Section

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

Articles of Incorporation (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: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: 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.

Page 1 of 4

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: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	0	olypry Henring	794 W. ELKHAM CIRCLE #2001
Remove			Marco Island, Fly1145
2) Change	<u>D</u>	Robert Dibacoo	4344 Corporate Soyace Suite 1
Add Remove	_		Naples, FI 34104
3) Change	_0_	Todd Caulson	5800 Mesle Hay Read
Remove			Johnston, IA 50131
4) L Change	\mathcal{D}^{V}	Mixe Mclead	9220 Boxita Beach Rd.
Add			Buite 120 Bonita Sorings, FL
5) Change	SDT	Gary Odenweller	10078 Hidden Pineslane
X_ Add		J	Bonita Springs FL 34135
Remove 6) Change	DP	Beith Miller	10072 Urdden Pines Lane
Add			Bonita Springs, FL
Remove		Daga 2 of 4	<u></u>

E. If amending or adding add (attach additional sheets, if n	itional Article ecessary). (I	s, enter change 3e specific)	(s) here:			
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	date of each amendment(s) adoption:, i	f other than the
Effe	tive date if applicable: 7/24/15	
	(nolmore than 90 days after amendment file date)	
<u>Not</u> doc	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I nent's effective date on the Department of State's records.	isted as the
Ado	otion of Amendment(s) (CHECK ONE)	
À	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 8/15/16	
	Signature	
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Gary M. Odenweller (Typed or printed name of person signing)	
	Secretary Treasurer (fittle of person signing)	16 /
	HASS	100 I S
		3 /7:
		V C