N0300010185

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2001)
Continue of Change
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200301365902

07/24/17--01041--026 **85.04



COVER LETTER

TO: Amendment Section Division of Corporations Tobblestone Homeowners Association of N03000010185 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) NW BridgeWATER TERRACE
(Address) LAKE City Fl. 32055 edoga_13264Ahoo. Com
ail address (Jo be used for future annual report notification) For further information concerning this matter, please call: RANCY BURNHAM

(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 & 343.75 Filing Fee & Certificate of Status Certified Copy \$52,50 Filing Fee Certificate of Status (Additional copy is Certified Copy

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

(Additional Copy is Enclosed)

Articles of Amendment

to

Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State (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 containing word "corporation" or "incorporated" or the abbreviation "Corp." or "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. 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	PT John Doe V Mike Jones SV Sally Smith		
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s	
Change Add Remove	T DAVID	HAUCK 188 NW Ambleside De LAKE City, FI 32055	<u>2</u> ¦U (
2) Change Add	ST Inga (Benond 339 NW Ambleside Dr. LAKE City Fl. 32055	ive
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

анасн ааанн	onal sheets, if ne	ecessary). (Be specific)					
	•							
								
								
				- - -				
						· ,,		
								
			• , , ,					
			·,,	· 				
		_						
				<u></u> .			.	
	 -	1.1					· · · · · · · · · · · · · · · · · · ·	
		<u> </u>						
						•		
		-						
							 .	
	 			<u></u> _	<u> </u>			
		 :						
								
						· · · · · ·		
<u> </u>								

he date of each amendment(s) adoption:ate this document was signed.	7/17/2017	, if other than the
ffective date if applicable:	re than 90 days after amendment file date)	
lote: If the date inserted in this block does not moournent's effective date on the Department of St	neet the applicable statutory filing requirements, t	his date will not be listed as the
doption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the r was/were sufficient for approval.	members and the number of votes cast for the am	endment(s)
There are no members or members entitled to adopted by the board of directors.	o vote on the amendment(s). The amendment(s)	was/were
Dated <u>7/18/20</u>	77	
Signature Rand (Roulin	
	hairman of the board, president or other officer-it y an incorporator — if in the hands of a receiver, to uciary by that fiduciary)	
RANd	Y BURNNAM (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
Pre	Sident	
	(Title of person signing)	