1003544

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		

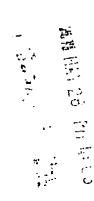




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RECEIVED MAY 28 2019



COVER LETTER

LLC.

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: WOODLAND	VILLAGES MA	NOR HOMES ASS	DCIATION
DOCUMENT NUMBER: <u>N03544</u>	 		
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	to the following:		F. (5) 20
GENE DE GIORGIO	0		
			7. Ta
WOODLAND VILLAGES	MANOL Home (Firm/Company)	S ASSOCIATION	2, UC :
2408 S.E. 20th CIR	(Address)		
OCALA FLORIDA 34	47/		
GJD 951 @ BLUSA E-mail address: (to be used			·
For further information concerning this matter, please c	call:		
GENE DE GIOR GIO	at <u>6</u>	78	
(Name of Contact Person) Enclosed is a check for the following amount made pay			ie Number)
\$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	Division o Clifton B	ent Section of Corporations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WOOSLAND VILLAGES M	PANION	Homes	ASSOCIATIO	m, uc	·
	n as current	lly filed with the	Florida Dept. of State	e)	
NO3544			7.61		
(Docu	ment Numbe	er of Corporation	i (if Known)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida N</i>	ot For Profit Corporati	on adopts th	e following
A. If amending name, enter the new name of th	<u>e corporati</u>	on:		_	j.
N/A		The:new			
name must be distinguishable and contain the wor		ion" or "incorpe	orated" or the abbrevia	tion "Corp."	or "Inc."
"Company" or "Co," may not be used in the name	<u>1e</u> .	. / 1		•	- 3
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A		N/A			 :
(Principal office address MOST BE A STREET A	I <u>DDKESS</u>)				. (
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	N/A			*
				- 5	
				··	
					<u> </u>
D. If amending the registered agent and/or regi			rida, enter the name o	<u>f the</u>	
new registered agent and/or the new register	red office a	ddress:			
Name of New Registered Agent:	_1/	<u> </u>			<u>. </u>
			 	 	
New Registered Office Address	:		(Florida street address)		
	N/	Δ			
	_/Y/I	7	, ri , ri	orida <u> </u>	
New Degistered Agent's Signature if changing	Danietarad	A gont:			
New Registered Agent's Signature, if changing if thereby accept the appointment as registered agent			ccept the obligations of	the position	
		1 1			
-	$-N_{\ell}$	H	Registered Agent, if cha		
	Si	gnature of New I	Registered Agent, if cha	nging	

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: XChange X Remove X Add	<u>PT</u> <u>John</u> <u>V</u> <u>Mike</u> <u>SV</u> <u>Sally</u>	Jones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	P	ANN GRIFFEN	2413 SE 20 Th CIRCU ECALA FL 34471
2) Change	<u>P</u> _	GENE DE GIOR GIO	2408 SE 20Th CIRC OCALA FL. 34471
Remove 3) Change Add	5_	MARY KEIP	2405 SE 20th CIR. OCALA FL 34471
Remove 4) Change Add			
Remove 5) Change Add			
Remove Change Add Remove			

E. If amending or adding additional Arti	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
N/A	
,	
	
	
	
-	

The date of each amendment(s) a	doption: N//	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	NA	
<u> </u>	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this blocument's effective date on the Do	ock does not meet the applicable statutory filing repartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes al.	cast for the amendment(s)
There are no members or mem adopted by the board of direct Dated	ors. State State	amendment(s) was/were
Signature	y De Duyo	
have not be	rman or vice chairman of the board, president or en selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
	TENTE DE GIOR GIO (Typed or printed name of persor	
	Presi Dest	
	(Title of person signi	ng)