N0400002382

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(Address)						
(Address)						
(City/State/Zip/Phone #)						
(Business Entity Name)						
(Document Number)						
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;	<u>COVER LETTER</u>		4
TO: Amendment Section Division of Corporations			
LORRAINE CORN	ERS OWNERS' ASSOC		С.
N04000002382			
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
MICHAEL P. INFANTL, ESQ.			
	(Name of Contact Perso	on)	
INFANTI LAW, PLLC			
	(Firm/ Company)		
1605 MAIN STREET, SUITE 1112			
	(Address)	<u> </u>	
SARASOTA, FL 34236			
	(City/ State and Zip Co	de)	
MINFANTI@ILFPLLC.COM			
E-mail address: (to be use	ed for luture annual repor	1 notification)
For further information concerning this matter, pleas	se call:		
MICHAEL P. INFANTI	9 at	41	289-3929
(Name of Contact Perso		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida De	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certifi Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divis The 2415	et Address ndment Secti sion of Corpe Centre of T 5 N. Monroe hassee, FL 3	orations allahassee : Street, Suite 810

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Articles of Amendment to Articles of Incorporation Ωf

LORRAINE CORNERS OWNERS' ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N0400002382

(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:

The new name must be distinguishable and contain the word "corporation" or "incorporated" 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 MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 5391 LAKEWOOD RANCH BLVD., SUITE 100

5391 LAKEWOOD RANCH BLVD., SUITE 100

SARASOTA, FL 34240

SARASOTA, FL 34240

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:

> MICHAEL P. INFANTI, ESQ. Name of New Registered Agent:

> > 1605 MAIN STREET, SUITE 1112

(City)

New Registered Office Address:

(Florida street address)

. Florida <u>34236</u> (Zip Code)

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.

SARASOTA

Signature of New Registered Agent, if changing Michael IsFaf, as its Profiles

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John Da</u> <u>V Mike Jo</u> SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	DS	DEBORAH BYERLY	14400 COVENANT WAY LAKEWOOD RANCH, FL 34202
×Remove			
2) Change Add	DP	KIRK BOYLSTON	14400 COVENANT WAY LAKEWOOD RANCH, FL 34202
X Remove 3) Change Add X Remove	<u>DVPT</u>	SCOTT J. ALMAND	14400 COVENANT WAY LAKEWOOD RANCH, FL 34202
4) Change Add	DP	MATT DREWS	5391 LAKEWOOD RANCH BLV1 SARASOTA, FL 34240
Remove			
5) Change Add	DVP	DAN MOYER	5391 LAKEWOOD RANCH BLVI SARASOTA, FL 34240
Remove			
6) Change Add	DS	EUGENE STREETT	5391 LAKEWOOD RANCH BLVI SARASOTA, FL 34240
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (attach additional sheets, if necessary). (Be specific)

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	SEPTEMBER 6, 202	3				
The date of each amendmen	t(s) adoption:		, if other than the			
date this document was signed	l.					
Effective date <u>if applicable</u> :	SEPTEMBER 6, 2023					
nuccuve uate <u>it apparable</u> :	(no more than 90 days after amendment file date)					
Note: If the date inserted in the	is block does not meet the applicabl	e statutory filing requirements, this	date will not be listed as the			
document's effective date on t	he Department of State's records.					

Adoption of Amendment(s) (<u>CHECK_ONE</u>)

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 There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

SEPTEMBER 6, 2023 Dated Signature (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) Anthony Chiofalo (Typed or printed name of person signing)

Vice President

(Title of person signing)