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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Southern Pines Home	cowners Association of C	lermont, Inc	
N040 DOCUMENT NUMBER:	00002628			
The enclosed Articles of Amenda	nent and fee are subm	nitted for filing.		
Please return all correspondence of	oncerning this matter	r to the following:		
Mike Miller				
	,	(Name of Contact Persor	1)	
Empire Management Group, Inc				
		(Firm/ Company)		
1135 East Ave				
		(Address)		
Clermont, FL				
		(City/ State and Zip Code	2)	
mmiller@empiremanagementgrp	.com			
E-mail	address: (to be used	for future annual report i	notification)	
For further information concerning	g this matter, please	call:		
Mike Miller		352 at	2-535-0099	
(Nam	ne of Contact Person)	(Ar	ea Code) (Daytime	Felephone Number)
Enclosed is a check for the follow	ing amount made pa	yable to the Florida Depa	ertment of State:	
	343.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of State Certified Copy (Additional 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

### Articles of Amendment to Articles of Incorporation of

Southern Pines Homeowners Association of Clermont, Inc.

(Name of Corporation	as curre	ntly filed with the Floric	la Dept. of State)		
N04000002628					
(Docum	ent Num	ber of Corporation (if kno	own)		
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statu	tes, this Florida Not For	<i>Profit Corporation</i> ad	opts the	following
A. If amending name, enter the new name of the	corpora	<u>ition:</u>			
N/A					The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name		ation" or "incorporated"	or the abbreviation "	Corp."	
B. Enter new principal office address, if applical	ble:	N/A			
(Principal office address <u>MUST BE A STREET Al</u>	DDRESS	<u>(</u> )			
				نائ <i>ت</i>	~~ <u>~</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	ROX)	N/A		产品 二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二	
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D. If amending the registered agent and/or regis			nter the name of the	1500	- 7¥     7€
new registered agent and/or the new registered	ed office	address:		2214	
Name of New Registered Agent:	N/A			(3) P1	<b>-</b>
New Registered Office Address:		(Flo	rida street address)		
New Registere Office Address.	N/A				
		(Cia.)	, Florida (Zip C	·	
		(City)	(ZIP C	oae)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			he obligations of the p	osition.	
		Signature of New Registe	red 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	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	s	Alex Fabara	1135 East Ave
Add X Remove			Clermont, FL 34711
2) Change	<u>T</u>	Pete Hammarquist	1135 East Ave
Add X Remove			Clermont, FL 34711
3 ) Change	D	Scott Leither	1135 East Ave
Add X Remove			Clermont, FL 34711
4) X Change	D	Mary Sturges	1135 East Ave
Add			Clermont, FL 34711
5) Change	<u>T</u>	Donald Gurskey	1135 East Ave
X Add Remove			Clermont, FL 34711
6) Change	VP	Shelley Elliott	1135 East Ave
X Add			1135 East Ave Clermont R 34711

# 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>s</u>	Bruce Baiman	1135 East Ave
X Add			Clermont, FL 34711
Remove			
2) Change			1135 East Ave
Add		-	Clermont, FL 34711
Remove			
3) Change			1135 East Ave
Add			Clermont, FL 34711
Remove			
4) Change			1135 East Ave
Add			Clermont, FL 34711
Remove			
5) Change			1135 East Ave
Add		-	Clermont, FL 34711
Remove			
6) Change			
Add			
Remove			

E. <u>If amer</u> (attach	nding or addin additional sheet	g additional Arti s, if necessary).	cles, enter chan (Be specific)	ige(s) here:				
N/A								
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March 30, 2017	
The date of each amendment(s) adoption:, if other the	oan the
date this document was signed.	
March 30, 2017	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.	the
Adoption of Amendment(s) (CHECK ONE)	
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 <u>April 10, 2017</u>	
Signature Jeanne & Swords	
(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)	
Jeanne A. Swords (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	