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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: Dorchester Estatos Home Owners Assoc. In	' C •
DOCUMENT NUMBER: NO 4 00000 5170	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Frank W. VERO (Name of Contact Person)	
(Name of Contact Person)	
(Firm/ Company)	
<u>C/O ZOS/ S.W. College Road Uni 7</u> (Address)	لے <i>ا</i>
CALA FL, 34474 (City/State and Zip Code)	
Frank Vero 8376 O gwa', / Cow E-mail address: (to be used for future agricul report notification)	
For further information concerning this matter, please call:	
Frenk VERO at 352 207 2696 (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 \$\Bigcup \\$43.75 Filing Fee \& D\\$43.75 Filing Fee \& Certificate of Status Certified Copy (Additional copy is enclosed) \$\Bigcup \\$35 Filing Fee \& D\\$43.75 Filing Fee \& Certified Copy (Certified Copy is Enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment Articles of Incorporation of

Dorchester Estates Ho	OME OWNER'S	Association Inc.
(Name of Corporation as of	currently filed with the Flo	rida Dept. of State)
n/01/00000	フ ン.	
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fe	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must he distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	d" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:	ed office address in Florida ffice address:	cnter the name of the
-		lorıda street address)
New Registered Office Address:		
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent	
hereby accept the appointment as registered agent. I	am familiar with and accept	the obligations of the position.
		P () 202
	Signature of New Regist	tered Agent, if and raing
	Page 1 of 4	TARY OF STARSSEE, FLO
		SALE SE

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.

sinc sones, + as itemor	e, ana sany smur	n, SV as an Aad.	
Example: X Change X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	PID	Frank W. VERC	415 Bayview PKWY Nokowis FL. 34275
2)	<u>VS</u> D	Jerome Glassino	in <u>2801 Sw Collage R</u> — Unit 18 CKALA FL. 34471
Remove 3) Change Add			CKHLA IFL. 34471
Remove 4) Change			
Add Remove			
5) Change Add			
Remove 6) Change			
Add			

attach addi	tional sheets,	additional Art if necessary).	(Be specific)	1	_				
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The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date wintment of State's records.	It not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or membe adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated	- 2019 - Om/6	
have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
_ Fr	Quk M. VERO (Typed or printed name of person signing)	
Pre	Sident Board of Director's Dorce (Title of person signing)	høster Estates Ho