NO400005470

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
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SECRUTARY OF STATE DIVISION OF CORPORATION:

Amend

AUG 24 2015
I ALBRITTON

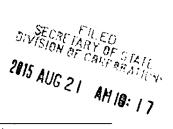
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Copper Ridge Terrace	e Homeowners Association, Inc.	
N04000005470		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subm	sitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Denise Abercrombie		
	(Name of Contact Person)	
Highland Community Management		
	(Firm/ Company)	
3020 S. Florida Ave., Suite 305		
	(Address)	
Lakeland, FL 33803		
((City/ State and Zip Code)	
info@hemanagement.org		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please of	call:	
Denise Abercrombie	863 940-2863	
(Name of Contact Person)		
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Copper Ridge Terrace Homeowners Association,	Inc.			
(Name of Corporation	as curren	tly filed with the Flori	ida Dept. of State)	
N0400005470				
(Docur	nent Numb	er of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not For</i>	r Profit Corporation adopts the following	
A. If amending name, enter the new name of the	e corporat	ion:		
			The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated	" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address)		3020 S. Florida Ave., Suite 305		
		Lakeland, FL 33803		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		3020 S. Florida Avc., Suite 305		
		Lakeland, FL 33803		

If amending the registered agent and/or reginew registered agent and/or the new registered.			enter the name of the	
	Denise Abercrombie			
Name of New Registered Agent:	A CONTRACT OF THE CONTRACT OF			
	3020 S. Florida Ave., Suite 305 (Florida street address)			
New Registered Office Address:		(1.16	niuu sii eei uuuressy	
	Lakeland		, Florida 33803	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing land the la			the obligations of the position.	
-		~ (
	120	nise W	permonte	

Page 1 of 4

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	<u>V</u> <u>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	LaToya Kelly	P.O. Box 46
Add X Remove			Kathleen, FL 33849
2) Change	P	Wayne Brackin	P.O. Box 46
X Add Remove			Kathleen, FL 33849
3) Change	VP	Erin Reedy	P.O. Box 46
X Add			Kathleen, FL 33849
4) Change	<u>T</u>	Josie Martinez-Garo	P.O. Box 46
X Add			Kathleen, FL 33849
Remove 5) Change	D	Abel Morales	P.O. Box 46
X Add			Kathleen, FL 33849
Remove	S	Martha Webb	P.O. Box 46
6) Change X Add			Kathleen, FL 33849
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A					
					·
- 101					
			CH		
	·			•	
					
				· · · <u> </u>	

August 8, 2015 The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 no document's effective date on the Department of State's records.	ot be listed as 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.	
Signature (By the chairman of 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)	
Wayne Brackin	
(Typed or printed name of person signing)	
President	
(Title of person signing)	