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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Heather brocke Estates Homecwner association
DOCUMENT NUMBER: N 0 4 0000 10 331
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Darelé Englert (Name of Contact Person)
(Name of Contact Person)
american Home Team Realty LLC (Firm/ Company)
(Firm/ Company)
253 Plaza Drive, Suite D (Address)
(Address)
Cviedo, FL 32765 (City/ State and Zip Code)
(City/ State and Zip Code)
DDNSengler+@hotmail.com E-mail address: (to be used for future annual report notification)
E-mail adoress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Darcie Englert Rame of Contact Person) at 407 359-9500 (Area Code) (Daytime Telephone Number)
(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 \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$64 Certificate of Status \\ (Additional copy is enclosed) \\ (Additional Copy is \Bigcup

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Heather brooke Es	tates Homeowners association. Inc.
(Name of Corporation as currently filed with the	
N040000	10331
	ent Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:
N/A	The new
name must be distinguishable and contain the word "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 AL	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	Oviedo, Fr 32765
new registered agent and/or the new registere	
Name of New Registered Agent:	american Home Team Realty, LLC
New Registered Office Address:	253 Plaza Drive, SuiteD (Florida street address)
-	Oviedo , Florida 35.765 (City) (Zip Code)
New Registered Agent's Signature, if changing Ro	egistered Agent:
	I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if Changing

Remove 2) X Change T Hayden Gonzales 253 Plaza Drive, Suite Add Oviedo, FL 32765 X Remove S Kristen Coleman Add Remove	and address of each (Attach additional she Please note the officer P = President; V = Vid	Officer and/or Di tets, if necessary) r/director title by t ce President; T= 1 O = Chief Financ	he first letter of the office title: Treasurer; S= Secretary; D= Director; TR= Ti ial Officer. If an officer/director holds more th	rustee; C = Chairman or Clerk; CEO = Chief
X.Change X.Remove X. Mike Jones X. Add S.V. Sally Smith Type of Action (Check One) 1) X. Change Add Coviedo, First Start Coleman Remove 2) X. Change Add Change Add Remove 3) Change S. Kristen Coleman Add Remove 4) Change S. Mary Stoner 253 Plaza Drive, Suite Oviedo, First 32765 4) Change S. Kristen Coleman Add Remove 4) Change S. Mary Stoner 253 Plaza Drive, Suite Oviedo, First 32765 Change Add Remove 4) Change S. Mary Stoner 253 Plaza Drive, Suite Oviedo, First 32765 Change Add Remove 6) Change Add Remove 6) Change Add Remove 6. Change Add Remove	a change, Mike Jones	leaves the corpore	ation, Sally Smith is named the V and S. These	
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2) \(\times \) Change Add \(\times \) Hayden Gonzales \(\times \) Size \(\times \) Remove \(\times \) Change \(\times \) Change \(\times \) Change \(\times \) Add \(\times \) Remove \(\times \) Change \(\times \) Add \(\times \) Remove \(\times \) Change \(\times \) Add \(\times \) Remove \(\times \) Change \(\times \) Add \(\times \) Remove \(\times \) Change \(\times \) Add \(\times \) Remove \(\times \) Remove \(\times \) The adding additional Articles, enter change(s) here:	Add	<u> </u>	Tony Sculthorpe	253 Phra Drive, Suite D Oviedo, Fr 32765
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 07/01/20	
Effective date if applicable: 07/01/20 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not 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 was/were sufficient for approval.	amendment(s)

×	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 x 7/1/20
	Signature X
	(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)
	× Tony Scotherpe (Typed or printed name of person signing)
	X President (Title of person signing)