## NCH 113

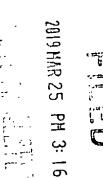
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C. GOLDEN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Sara-Cam Associates 11, Inc.
DOCUMENT NUMBER: NO4/13
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
James H. ERCEG (Name of Contact Person)
(Firm/ Company)
5635 CameHord Drive (Address)
Sarasota, FL 34233 (City/ State and Zip Code)
Vand JERCEG a mal/ com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James H. ERCEG at 94/-924-1749  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Área 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 & Certificate of Status

**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

FILED

2019 HAR 25 PM 3: 16 ida Dept. of State) (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: Came lot Lakes VIllage Homeowners Association of Inco 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) 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: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (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.

## 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>Y</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	NIA	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
i) Change		_			
Add					
Kemove					
2) Change	<del> </del>	-			
Add					
Remove					
3) Change		-			
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Remove					
5) Change		_			
Add					
Kemove					
6) Change		_			
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
The present Article I is a mended by
The present Article I is amended by deleting the name Sara-Cam Associates !! Inc. and substituting the name Camelot Lakes Village Homeowners Association, Inc.
Homeowners Association, Inc.
• •

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Effective date if appl	(no more than 90 days after amendment file date)
Note: If the date inser	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ti
	late on the Department of State's records.
Adoption of Amenda	nent(s) ( <u>CHECK ONE</u> )
The amendment(s was/were sufficie	s) was/were adopted by the members and the number of votes cast for the amendment(s) ent for approval.
adopted by the be	oard of directors.  Mayers b. 10 2010
Dated	11/01/6/11/19
Dated Signatur	Donal L. Wise
	(By the chairman or vice chairman of the board, president or other officer-if directors
	(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)  Donald L. Wise
	(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)
	(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)  Donald L. Wise