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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

i NAME OF CORPORATION	Greens at Hidden Cree	ek Homeowners Associ	iation, Inc.	
	N05000005218			
DOCUMENT NUMBER: _				
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Denise Abercrombie				
	(	Name of Contact Perso	on)	
Highland Community Mana	gement, LLC			
·		(Firm/ Company)		
3020 S. Florida Ave., Suite	305			
		(Address)		
Lakeland, FL 33803				
	(	City/ State and Zip Coc	ie)	
info@hemanagement.org				
Е	-mail address: (to be used	for future annual report	notification	n)
For further information conc	erning this matter, please c	ali:		
Denise Abercrombie		86 at	53	940-2863 ext 501
	(Name of Contact Person)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Dep	artment of	State:
■ \$35 Filing Fee	□S43.75 Filing Fee & E Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address  Amendment Section			Address	i
Amendment Section Division of Corporations			dment Sect on of Corpo	
P.O. Box 6327			n Building	OLUSIOSIO
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Greens at Hidden Creek Homeowners Association, Inc.

(Name of Corporation as curr	rently filed with the Florida Dept. of State)
N05000005218	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:
	The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>))</u>
	ALL
C. Enter new mailing address, if applicable:	ASS. 23
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	<del>X</del>
	D 0)
D. If amending the registered agent and/or registered o new registered agent and/or the new registered offic	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	
I hereby accept the appointment as registered agent. I am	
<del></del>	Simon of No. Design of America
	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 A Add	PT         John L           V         Mike J           SV         Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Kenneth Hudgins	35825 Diamond Head Ct
Add			Zephyrhills, FL 33541
X Remove			
2) X Change	PD	Kimberly Diaz	35804 Diamond Head Ct
Add			Zephyrhills, FL 33541
Remove 3) X Change	DV	Edgar Matteson	6416 Twin Bridges
Add			Zephyrhills, FL 33541
Remove			
4) Change	ST	Barbara High	6122 Champions Gate Blvd.
X Add			Zephyrhills. FL 33541
Remove			
5) Change			***
Add			
Remove			
6) Change	<del></del>	<del></del>	
Add			
Remove			

If amending or adding additional Articular (attach additional sheets, if necessary).	(Be specific)
	<del></del>
<u> </u>	
-	
	<del>-</del>

10/01/2018	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
10/01/2018	
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 document's effective date on the Department of State's records.	ll 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 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 10/8/2018	
Signature Kumbara Olaz	
(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)	
Kimberly Diaz	
(Typed or printed name of person signing)	
President	
(Title of person signing)	