

ND5000005443

(Requestor's Name)

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☐ PICK-UP

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 AUG 29 AM 11:28

SEP 12 2016
C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2016

PATTI MOSCOW / AIA PROPERTY MANAGEMENT
1621 E EDGEWOOD DR SUITE F
LAKELAND, FL 33803 US

SUBJECT: SUNSET VISTA HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N05000005443

We have received your document for SUNSET VISTA HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 216A00016792

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SUNset Vista Homeowners Association
Inc

DOCUMENT NUMBER: N05000005443

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patti Moscow

(Name of Contact Person)

AIA Property Management

(Firm/ Company)

1621 E Edgewood Drive Ste F

(Address)

Lakeland FL 33803

(City/ State and Zip Code)

patti@aiapropertymanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Moscow at 863-686-3700

(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

2016 AUG 29 AM 11:28

Sunset Vista Homeowners Association Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

NO5000005443

(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:

_____ *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.

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change	<u>T</u>	<u>Brian Knowles</u>	<u>1621 E Edgewood Dr</u>
<input checked="" type="checkbox"/> Add			<u>STE F</u>
<input type="checkbox"/> Remove			<u>Lakeland FL 33803</u>

2) <input type="checkbox"/> Change	<u>D</u>	<u>Adan Patton</u>	<u>1621 E Edgewood Dr</u>
<input checked="" type="checkbox"/> Add			<u>STE F</u>
<input type="checkbox"/> Remove			<u>Lakeland FL 33803</u>

3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

[illegible]

NO 5000005443

The date of each amendment(s) adoption: July 21, 2016
date this document was signed.

FILED, if other than the
SECRETARY OF STATE
DIVISION OF CORPORATION

Effective date if applicable: July 21, 2016
(no more than 90 days after amendment file date)

2016 AUG 29 AM 11:28

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7/22/16

Signature

Patricia Moscow

(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)

Patricia Moscow

(Typed or printed name of person signing)

Property manager AIA CAM

(Title of person signing)

Secretary

Secretary