## N05000005845

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Dover Grove Estates Homeowne NAME OF CORPORATION:	ers Assocation, Inc.
N05000005845 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for fil	ing.
Please return all correspondence concerning this matter to the following	owing:
Denise Abercrombie	
(Name of C	Contact Person)
Highland Community Management	
(Firm/	Company)
3020 S. Florida Ave., Suite 305	
(Ac	ddress)
Lakeland, FL 33803	
(City/ State	and Zip Code)
info@hcmanagement.org	
E-mail address: (to be used for future a	uniual report notification)
For further information concerning this matter, please call:	
Denise Abercrombie	863 9402863 at
(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 F  Certificate of Status Certified (Addition enclosed)	Copy Certificate of Status nal copy is Certified Copy

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

Dover Grove Estates Homeowners Association, Inc.			
(Name of Corporation as curre	ntly filed with the Flo	rida Dept. of State)	
N05000005845			
(Document Num	iber of Corporation (if I	(nown)	•
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not F</i>	or Profit Corporation ado	pts the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>		
			The ne
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporate	d" or the abbreviation "C	
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2019 DEC - SECRETA
			RY UP S ASSEE.
). If amending the registered agent and/or registered of new registered agent and/or the new registered office		, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(1	Florida street address)	
		P1:1_	
	(City)	, Florida, Zip Co	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am j	d Agent:		•
	Signature of New Regi	stered 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>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P, D	Grauss, Margarete	3020 S. Florida Ave.
Add			Suite 305
Remove			Lakeland, FL 33803
2) Change	VP	Gonzalez, Reynaldo	3020 S. Florida Ave.
X Add			Suite 305
Remove			Lakeland, FL 33803
3) Change	S	Mong, Karina	13114 Done Groven
Add			Dover, FL 33527
X Remove			
4) X Change	T, D	Ellison, KareyAnn	3020 S. Florida Avc
Add	· · · · · · · · · · · · · · · · · · ·		Suite 305
Remove			Lakeland, FL 33803
5) X Change	S, D	Rodriguez, Glenn	3020 S. Florida Ave.
Add			Suite 305
Remove			Lakeland, FL 33803
6) Change			
Add	<del></del>	-	
Remove			

•	(Be specific)				
		<del></del>			
		-			
				· <del>-</del>	
			•		
				<del></del>	
					<del></del>
	<del>_</del> _				

	11/18/2018	
The date of each amendmen	t(s) adoption:	_, if other than the
date this document was signed	1.	
ū	11/18/2018	
Effective date if applicable:	17/10/2010	
A STATE OF THE STA	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
☐ There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	0/2018	
Signature (		
<del></del>	e charman or vice chairman of the board, president or other officer-if directors	-
	not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	court appointed fiduciary by that fiduciary)	
Odici	court appointed inductary by that inductary)	
Mı	argarete Grauss	
	(Typed or printed name of person signing)	
н	DA Board President	
	(Title of person signing)	