

(Requestor's Name)
(Address)
(Address)
(1.00.000)
1011 1011 1011
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Coodment Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600304443396

10/24/17=-01022=+014 **455.00



Alexandre M. Mesidagh. Esc Sieve Wall. Esc Cory B. Suter. Esc David J. Kons. Esc Mark A. Grimes. Esc "David B. Falstod. Esc "Of Course!

October 19, 2017

SENT VIA FEDERAL EXPRESS: 7705 3640 6179___

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Applied Building Development - Amendments for Multiple Entities

Dear Sir/Madam:

Enclosed please find Articles of Amendment forms for changing the Treasurer for the following entities:

- 1. Toscana Community Association, Inc.
- 2. ABD Realty, Inc.
- 3. Applied Building Development Company Oakhills, Inc.
- 4. Applied Building Development of Orlando Providence, Inc.
- 5. Applied Building Development of Orlando W.L., Inc.
- 6. Applied Building Development of Orlando P.C., Inc.
- 7. Applied Building Development of Orlando Providence Marketing Company, Inc.
- 8. Applied Building Development of Orlando B.C., Inc.
- 9. Applied Building Development of Orlando, Inc.
- 10. Applied Building Development of Orlando M.L., Inc.
- 11. Applied Building Development of Orlando B.H., Inc.
- 12. Applied Building Development of Orlando S.L., Inc.
- 13. Providence Community Association, Inc.

Also enclosed is check number 1281 in the amount of \$455.00 that represents the \$35.00 fee to be applied to each of the 13 amendments listed above. If anything further is needed to complete these requests, please contact our office.

Sincerely,

Jessica McCord

Jessica McCord, Escrow Closer/Paralegal Mestdagh & Wall, P.A.

Encl.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Providence Comm	aunity Association, Inc.	
	BER:		
	of Amendment and fee are si	abmitted for filling.	
Please return all corre	spondence concerning this ma	nter to the following:	
	Alexandre M. Mestdagh, Es	q.	
		Name of Contact Perso	n
	Mestdagh & Walf, P.A.		
		Firmy Company	
	541 S. Orlando Ave, Suite 2	· •	
		Address	
	Maitland, Fl. 32751		
		City/ State and Zip Cod	· ·
alex/	gm-wlawfum.com		
		sed for future annual report	notification)
For further informatic	n concerning this matter, plea		702-6702
Name of Contact Person		at (at Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□543.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy (8 enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisir Chrìon 2661 E	Address Iment Section on of Corporations Building (vecutive Center Circle (assec, FL 32301

FILED

Articles of Amendment

17 OCT 24 PM 1:54

Articles of Incorporation

of SPERETARY OF LIMIT TRELANASSEE FEORIDA

Providence Community Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N05000007475 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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_ 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 Evenutive 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: <u>X</u> Change	<u>PT</u> <u>J</u>	<u>ohn Doe</u>				
X Remove	<u>V</u>	Mike Jones				
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	Т	Dwight Smith	131 Chadwick Drive			
Add X			Davenport, FL 33837			
Remove						
2) Change	T'	Cynthia M. Proulx	131 Chadwick Drive			
XAdd			Davenport, FL 33837			
Remove						
3.) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5)Change						
Add						
Remove						
6) Change						
Add						
Remove						

tach additional sh	ects, if necessary),	(Be specific)				
						
						
						
					-	
						 -
 -						
·· · - · - · - · - · - · - ·						
						
			-	-		
		-			<u>-</u>	
						 .
_ _						
~					· · · · · · · · · · · · · · · · · · ·	
an amendment pi	rovides for an exch	<u>jange, reclassific</u>	<u>ation, or cance</u>	llation of issue	d shares,	
rovisions for imp	lementing the ame	<u>ndment if not co</u>	ntained in the a	amendment its	<u>elf:</u>	
(11 not applicat	le, indicate N/A)					
·					· · · · · · · · · · · · · · · · · · ·	
		_				
					· · -	
						
						
						
						

701 I - F - A	8/30/2017	
The date of each amendment date this document was signed		if other than the
date this document was signed	- 8/30/2017	
Effective date it applicable:	6.50/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote:	s east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
Dated/ Signature	0/17/2.017 Yuvar Botansley President	
(H Sc	By a director, president or other officer – if directors or officers have not been elected, by an incorporator Lif in the hands of a receiver, trustee, or other court popointed fiduciary by that tiduciary)	
	Yuval Botansky	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	·