

ND5000009668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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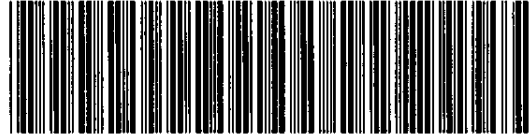
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HARDWOOD Hammock Road Maintenance Assoc. INC.

DOCUMENT NUMBER: NO5000009668

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

Please return all correspondence concerning this matter to the following:

Jacqueline YOUNGSTAND
(Name of Contact Person)

(Firm/ Company)

P.O. Box 801
(Address)

Crawfordville FL 32326
(City/ State and Zip Code)

Jacki Young@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline YOUNGSTAND at (850) 509-1062
(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 ☐ \$43.75 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 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

FILED
15 MAR -9 PM 5:05
TALLAHASSEE, FL 32301
SECRETARY OF STATE

Articles of Amendment
to
Articles of Incorporation
of

Hardwood Hammock Road Maintenance Assoc. Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

NO 500000 9668

(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:

HARDWOOD HAMMOCK PROPERTY OWNERS INC
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)

400 Pine Lane
Crawfordville
FL 32327

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 801
Crawfordville
FL 32326

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:

Jacqueline YOUNGSTAND

400 PINE LANE

(Florida street address)

New Registered Office Address:

Crawfordville, Florida 32327
(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.

Jacqueline Youngstand
Signature of New Registered Agent, if changing

15 MAR -9 PM 5:05

FILED

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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>RON McKAYE</u>	<u>1352 River Plantation Rd</u> <u>Crawfordville</u> <u>FL 32327</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>SUSAN McKAYE</u>	<u>1352 River Plantation Rd</u> <u>Crawfordville</u> <u>FL 32327</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>MORGAN B. Helton</u>	<u>87 Tafflinger Rd</u> <u>Crawfordville</u> <u>FL 32327</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Jacqueline YOUNGSTRA</u>	<u>AND 400 Pine Ln</u> <u>Crawfordville</u> <u>FL 32327</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>SARAH Wright</u>	<u>40 COVINGTON Dr</u> <u>Crawfordville</u> <u>FL 32327</u>
6) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>DANIEL SOUTHWORTH</u>	<u>4263 FOUR OAKS Dr</u> <u>Tallahassee</u> <u>FL 32311</u>

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)

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<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>Roger Sharp</u>	<u>8205 S. INDIAN</u> <u>River Rd</u> <u>Ft. Pierce FL 34982</u>
2) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>KAREN Thomas</u>	<u>136 HUDSON LN</u> <u>Crawfordville</u> <u>FL 32327</u>
3) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____
4) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____
5) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____
6) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N / A

The date of each amendment(s) adoption: December 15, 2014, if other than the date this document was signed.

Effective date if applicable: FEBRUARY 15, 2015
(no more than 90 days after amendment file date)

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 2/15/2015
Signature Jacqueline Youngstrand
(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)

Jacqueline YOUNGSTRAND
(Typed or printed name of person signing)
President
(Title of person signing)