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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION:	eserve Homeov	wners Association, Inc.
DOCUMENT NUMBER: N0600004	562	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Denise Abercrombie		
	(Name of Contact Person	n)
Highland Community Ma	nagement,	LLC
	(Firm/ Company)	· · · · · · · · · · · · · · · · · · ·
3020 S. Florida Ave., Su	ite 101	
	(Address)	
Lakeland, FL 33803		
	(City/ State and Zip Code	2)
info@hcmanagen	nent.org	
E-mail address: (to be used		notification)
For further information concerning this matter, please	call:	
Denise Abercrombie	at (619-7103 ext 297
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle
i alianassee. FL 32314		issee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Eastridge Preserve Home	eowners As	sociation, Inc.	
(Name of Corporation as currently	filed with the Flor	rida Dept. of State)	
N06000004562			
(Docur	nent Number of Co	rporation (if known)	
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		s, this <i>Florida Not For Profit Corporation</i> adopts t	he followin
A. If amending name, enter the new nam	ie of the corporati	on:	
N/A			The nev
		ion" or "incorporated" or the abbreviation "Corp.	
"Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:		3020 S. Florida Ave.	
(Principal office address MUST BE A STI		Suite 101	
		Lakeland, FL 33803	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST Of			
new registered agent and/or the new	registered office a	e address in Florida, enter the name of the ddress:	
Name of New Registered Agent:	3020 S. Flo	rida Ave., Suite 101	
		(Florida street address)	
New Registered Office Address:		,	
	Lakeland	, Florida 33803	
New Registered Agent's Signature, if chall hereby accept the appointment as register	red dgent. \am fan	(Zip Co	

Page 1 of 4

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 <math>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	PT John I V Mike . SV Sally 5	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	BD	Ron Drummonds	18235 Rose Street
Add			Groveland, FL 34736
X Remove			
2) Change	<u>D</u>	Audrey Drummonds	18235 Rose Street
Add			Groveland, FL 34736
X Remove			- m
3) Change	PD	D. Joel Adams	3020 S. Florida Ave.
X			Suite 101
Remove			Lakeland, FL 33803
4) Change	VPD	Robert J. Adams	3020 S. Florida Ave.
X			Suite 101
Remove			Lakeland, FL 33803
5) Change	STD	Stacy Allison	3020 S. Florida Ave.
X			Suite 101
Remove			Lakeland, FL 33803
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
- ····	
t	A PART OF THE PART

The date of each amendmedate this document was sign-	ent(s) adoption: 10/01/2014	, if other than the
Effective date if applicable	10/01/2014	
	(no more than 90 days after amendment file date)	 -
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members adopted by the hoard of	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
Dated 10	0/9/2014	
(By t	the chairment of vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
D. Joe	el Adams	
	(Typed or printed name of person signing)	
Presid	dent	
	(Title of person signing)	