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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:EASTRIDGE PRESERVE HOMEOWNERS' ASSOCIATION, INC.
N06000004562 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Denise Aber Crombie (Name of Contact Person)
Highland Community Management
4110 S. Florida Ave, Suite 200
Lakeland, FL 33813 (City/ State and Zip Code)
info @ hcmanagement our annual report notification)
For further information concerning this matter, please call:
Denise Abercrombie a 843 940 2862
(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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status (Additional Copy is Enclosed)
Mailing Address

Mailing Address
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EASTRIDGE PRESERVE HOMEOWNERS' ASSOCIATION, INC.

(Name of Corporation as currently filed with the Fl	orida Dept. of State)			
N06000004562				
(Document	Number of Corporati	on (if known)	 -	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida	Not For Profit Corp	oration adopts th	ne following
A. If amending name, enter the new name of the co	rporation:			
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incor	porated" or the abbr	eviation "Corp."	The new 'or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	RESS)			-
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	o			
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	ed office address in F ffice address:	lorida, enter the nai	me of the	
Name of New Registered Agent:				
New Registered Office Address:	<u> </u>	(Florida street addre	ess)	
 -			. Florida	
	(City)		(Zip Code)	21
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent; am familiar with and	accept the obligation	s of the position.	21 JUL -7
	Signature of New	Registered Agent, if a	changing	## 8: 56 3: 5

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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	P	Angela Bennett	3020 S. FLORIDA AVE - STE. 305 LAKELAND, FL 33803
X Remove			
2) Change Add	<u>\</u>	Faith Biggs	3020 S. FLORIDA AVE - STE, 305 LAKELAND, FL 33803
X Remove 3) Change Add Remove	D	Susan Gilbert	3020 S. FLORIDA AVE - STE. 305 LAKELAND, FL 33803
4) Change × Add	VP	Regina Strickland	3020 S. FLORIDA AVE - STE. 305 LAKELAND, FL 33803
Remove 5) × ChangeAdd	<u> </u>	Kevin Thaver	3020 S. FLORIDA AVE - STE. 30: LAKELAND, FL 33803
Remove 6)Change 4Add		Thomas Schatzinger	3020 S. FLORIDA AVE - STE, 305 LAKELAND, FL 33803
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
	· ·		
	<u> </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)

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.

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Example: X Change X Remove X Add	PT John I. V Mike J SV Sally S	ones		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
Change Add	<u>75</u>	WILLIAM RAY	3020 S. FLORIDA AVE - STE. 305 LAKELAND, FL 33803	
Remove 2) Change Add	_0_	Eugene Robinson	3020 S FLORIDA AVE - LAKELANO, FL 33803	STE 30S
Remove 3)Remove AddRemove				
4) Change Add				
Remove 5) Change Add				
Remove				
6) Change Add				
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)		

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The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	bes not meet the applicable statutory filing requirements, this date will not nent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONF)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

adopted by the board of directors.	c on the amendment(s). The amendment(s) was/were
Dated June 16,	2021
Signature	
	nan of the board, president or other officer-if directors neorporator – if in the hands of a receiver, trustee, or by that fiduciary)
KEVIN	THAYER
(Ту	ped or printed name of person signing)
Presider	, 7
	(Title of person signing)