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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	Bella Vista I	ake Condominium Associa	tion Inc	
DOCUMENT NUM	N0600000458	0		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Marta Villa			
		Name of Contact Person		
	Bella Vista Lake Condominio	um Association Inc		
		Firm/ Company		
	417 Fountainhead Circle			
		Address	<del></del>	
	Kissimmee, FL, 34741			
		City/ State and Zip Code	; <u> </u>	
adr	min@bellavistalakecondomini			
	E-mail address:	(to be used for future annual	report notification)	~ · · ·
For further information	on concerning this matter, plea	se call:		
Marta Villa		at ( 407	343-9399	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	STATE STATIONS
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	<b>₹</b>
Mailing Add	dress:	Street Address:		

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

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

2020 MTC - 2 MM 10: 36

March 27, 2020

MARTA VILLA BELLA VISTA LAE CONDOMINIUM ASSOCIATION 417 FOUNTAINHEAD CIRCLE KISSIMMEE, FL 34741

SUBJECT: BELLA VISTA LAKE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N06000004580

We have received your document for BELLA VISTA LAKE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 520A00006809

## Articles of Amendment to Articles of Incorporation

Articles of Incorporation 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: 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 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: (Zip Code) (City) 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 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 D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	_P	Alvaro Gomez	417 Fountainhead Liesh
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she		ticles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption:date this document was signed.  Effective date if applicable:(no more	3-4-2020		, if other than the
Effective date if applicable:	3.4 2020		
(no mor	re than 90 days after amendment	file date)	
Note: If the date inserted in this block does not m	neet the applicable statutory filing	requirements, this date will	not be listed as the

document's effective date on the Department of State's records.

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
Signature  (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)
Pedro Coballos  (Typed or printed name of person signing)
Secretary (Vitle of person signing)