

No 600000 6450

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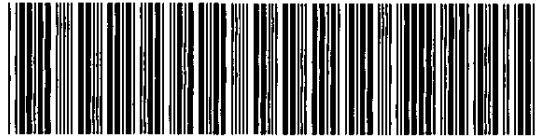
(Business Entity Name)

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08 MAR 17 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
KRB
3/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 11, 2008

JEFFREY L. KAPLAN
KAPLAN LAW FIRM, P.L.
950 S. WINTER PARK DR., SUITE 350-B
CASSELBERRY, FL 32707

SUBJECT: CYPRESS POINTE OF POLK COUNTY HOMEOWNERS'
ASSOCIATION, INC.
Ref. Number: N06000006450

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 208A00008606

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cypress Pointe of Polk County Homeowners' Association, Inc.

DOCUMENT NUMBER: N06000006450

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

Please return all correspondence concerning this matter to the following:

Jeffrey L. Kaplan

(Name of Contact Person)

Kaplan Law Firm, P.L.

(Firm/ Company)

950 S. Winter Park Drive, Suite 350-B

(Address)

Casselberry, Florida 32707

(City/ State and Zip Code)

For further information concerning this matter, please call:

Jeffrey L. Kaplan

(Name of Contact Person)

at (407) 260-5432

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

**Articles of Amendment
to
Articles of Incorporation
of**

Cypress Pointe of Polk County Homeowners' Association, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

FILED
08 MAR 17 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N06000006450

(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

The principal address, mailing address and officer(s)/director(s) address shall be:

1313 Cypress Pointe Boulevard

Davenport, Florida 33896

The date of adoption of the amendment(s) was: February 14, 2008

Effective date if applicable: _____
(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 was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

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.)

WES WILGINTON

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

FILING FEE: \$35