## MODODON

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(230, 130)
(Document Number)
(Securior Name)
Codified Conice Codificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<b>;</b>
•

Office Use Only



800318697488

09/28/18--01019--002 \*\*35.00

FILE D

18 SEP 28 AH 5: 06

SANDANIA CANADA CANADA

OCT 03 2018 S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations

BROOKSHIR NAME OF CORPORATION:	E HOMEONWERS ASSOCIATION, INC.
N06000007611	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Denise Abererombie	
	(Name of Contact Person)
Highland Community Management, LLC	
	(Firm/ Company)
3020 S. Florida Avc., Suite 305	
	(Address)
Lakeland, FL 33803	
	(City/ State and Zip Code)
info@hemanagement.org	
E-mail address: (to b	pe used for future annual report notification)
For further information concerning this matter,	please call:
Denise Abercrombie	863 940-2863
(Name of Contact	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing B Certificate of \$	Fee & \$\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{\Bar{
Mailing Address	Street Address

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BROOKSHIRE HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation	as curren	tly filed with the Florida De	pt. of State)	<del></del>
N06000007611				
(Docur	nent Numb	per of Corporation (if known)	-	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statuti	es, this <i>Florida Not For Profit</i>	Corporation adopts the	ne following
A. If amending name, enter the new name of the	e corporat	ion:		
				_The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated" or th	e abbreviation "Corp.	
B. Enter new principal office address, if applicable:		3020 S. Florida Ave., Suite 3	305	
(Principal office address MUST BE A STREET ADDRESS)		Lakeland, FL 33803		
			2:-	<del>: 55</del>
				<del>-</del> -4
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B		3020 S. Florida Ave., Suite 3	305	P 28
		Lakeland, FL 33803		· · · · · · · · · · · · · · · · · · ·
			9	Ç?
		-	<del></del>	6
D. If amending the registered agent and/or regi			he name of the	
new registered agent and/or the new register				
Name of New Registered Agent:	Highland	Community Management, LL	C	
	3020 S. F	lorida Ave., Suite 305		
V 20 1 100 111		(Florida str	eet address)	
New Registered Office Address:			27002	,
	Lakeland	<u>-</u>	Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I				
I hereby accept the appointment as registered agen	ıt. 1 dm fa	miliar with and accept the obl	igations of the positior	t.
		lenise al	encron	عاط
_		ignature of New Registered Ag	gent, 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	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	p	Kenny Garrett	116 Polo Park East Blvd
Add			Davenport, FL 33897
X Remove			
2) Change	ST	Claffey, Lorcan	116 Polo Park East Blvd
Add			Davenport, FL 33897
X Remove			
3 ) Change	P	Fred Lintz	5060 Lunn Road
X Add			Lakeland, FL 33811
Remove			
4) Change	VP	David Marshall	5060 Lunn Road
X Add			Lakeland, FL 33811
Remove			
5) Change	ST	Misty Varner	5060 Lunn Road
X Add			Lakeland, FL 33811
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Ap- (attach additional sheets, if necessary).	(Be specific)	· <b>-</b>		
			 <del></del>	
	· .		 	
	<u>.</u>			
			•	
·				<del></del>
			<del>.</del>	
			 ·	
		<u> </u>	 	
<del></del>			 	

	9/25/2018	
The date of each amendar, date this document was sign	-	_, if other than the
Effective date if applicab	09/25/2018	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will not lon the Department of State's records.	oe listed as the
Adoption of Amendment	(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) w was/were sufficient for	as/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
There are no member adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were lof directors.	
Dated	/25/2018	
Signature	PS UM	_
ha	y the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or their court appointed fiduciary by that fiduciary)	
	Fred Lintz	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	