

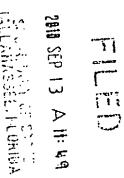
(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	——		Association, inc
N06000007675 DOCUMENT NUMBER:			
The enclosed <i>Articles of Amendment</i> and tee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Mike Miller			
	(Name of Contact Pers	son)	
Empire Management Group, Inc			
	(Firm/ Company)		
770 Almond Street, Ste A			
	(Address)		
Clermont, FL 34711			
	(City/ State and Zip Co	ode)	
mmiller@empiremanagementgrp.com			
E-mail address: (to be use	d for future annual repo	rt notificatio	1)
For further information concerning this matter, please	e call;		
Mike Miller	at	352	535-0099
(Name of Contact Perso	n)	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida De	partment of	State:
Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certit Certit	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ame Divis	et Address ndment Sect sion of Corpo on Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

The Gardens of Lake Jackson Ridge Homeowners Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N06000007675 (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: A. If amending name, enter the new name of the corporation: n/a 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: n/a (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: n/a , Florida _ (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: XChange X Remove X Add	PT John D V Mike J SV Sally S	<u>oneş</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	<u>Р</u>	Steve Orosz	
Add Remove			
2) Change	<u>V</u>	Joseph Meier	
X AddRemove			
3) Change Add	<u>TS</u>	Reginald Powers	
Remove			
4) Change	0	Empire Management Group, Inc	
Add x Remove			
5) Change			
Add			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
n/a					
	······································				
					

	08/28/18	
The date of each amendment(s) ac	loption:	, if other than the
late this document was signed.		
08/2	28/18	
Effective date if applicable:		
	tno more than 90 days after amendment file dater	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated August 31	2018	
Signature		
have not be	man or free engirman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Steve C	prosz	
	(Typed or printed name of person signing)	
Preside	nt	
	(Title of person signing)	