NDUDDCC 5023

(Re	equestor's Name)		
(Ad	dress)		
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COVER LETTER

TO: Amendment Section Division of Corporations

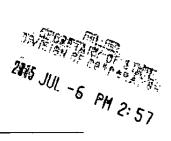
NAME OF CORPORATION:	ners Association, Inc.
DOCUMENT NUMBER: N06000008023	•
The enclosed Articles of Amendment and fee are sub-	omitted for filing.
Please return all correspondence concerning this mate	ter to the following:
Denise Abercrombie	
	(Name of Contact Person)
Highland Community Management	
	(Firm/ Company)
3020 S. Florida Ave., Suite 305	
	(Address)
Lakeland, FL 33803	
	(City/ State and Zip Code)
info@hcmanagement.org	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
Denise Abercrombie	863 940-2863 at
(Name of Contact Person	
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
\$35 Filing Fee \$\times \text{Certificate of Status}\$	Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Molling Address	Canada Addusan

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



Mandolin Homeowners Association, Inc.

Mandonn Homeowners Association, Inc.		
(Name of Corporation as	currently filed with the Flor	rida Dept. of State)
N06000008023		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
N/A		The new
name must be distinguishable and contain the word "co "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 ADD		d" or the abbreviation "Corp." or "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or registered new registered agent and/or the new registered of the ne	ed office address in Florida	enter the name of the
Name of New Registered Agent:		
- The state of the		
New Registered Office Address:	(F	lorida street address)
		, Florida
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regis	tered 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	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Sereno Trimarche	4461 Mandolin Blvd
X Add			Winter Haven, FL 33884
Remove			
2) Change	VP	Richard Hargett	4347 Mandolin Blvd.
X Add			Winter Haven, FL 33884
Remove	Ť	Jacomb Licato	335 Mandolin Lane
3) Change X	<u>T</u>	Joseph Licata	
Add Remove			Winter Haven, FL 33884
4) Change	S	Tom Popadak	4401 Mandolin Blvd.
X Add			Winter Haven, FL 33884
Remove			
5) Change	D	Wayne Faucette	4436 Mandolin Blvd.
X Add			Winter Haven, FL 33884
Remove			
6) Change	PD	D. Joel Adams	3020 S. Florida Ave.
Add			Suite 101
X Remove			Lakeland, FL 33803

Page 2 of 4

(Cont)

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 A_Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Brian Walsh	3020 S. Florida Ave., Suite 101
Add			Lakeland, FL 33803
X Remove			
2) Change	STD	Stacy Allison	3020 S. Florida Ave., Suite 101
Add			Lakeland, FL 33803
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		-	a)

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
		•	
<u> </u>			
			- · · ·
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	date of each amendment this document was signed		, if other than the
Effe	ctive date <u>if applicable</u> :	June 2, 2015	
		(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	t be listed as the
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated	6/22/15	
	Signature	ABP X	
	have i	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Se	reno Trimarche	
		(Typed or printed name of person signing)	
	Pro	esident	
	<u></u>	(Title of person signing)	