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Pamela T. Karlson, B.C.S. Board Certified Real Estate Lawyer



Joy Bogaert, Esq. Of Counsel

Of Counsel

October 7, 2015

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

RE:

The Village on Lake Rachard Homeowners Association, Inc.

Document Number: N06000009709

Our File No. 263-15

Dear Sir or Madam:

Enclosed please find a cover letter and Articles of Amendment to the Articles of Incorporation for the above-referenced not-for-profit corporation. We have also enclosed our check in the amount of \$35.00 made payable to the Florida Department of State to cover the filing fee.

Pursuant to our conversation with the Amendment Section this morning, the property that this Homeowners Association belongs to has been sold; therefore, we are removing the officers and directors shown in the 2015 Annual Report, which includes the original incorporator, and we are adding three (3) new officers and directors and a new Registered Agent. These Articles of Amendment have been signed by the new President/Director.

If you have any questions pertaining to this filing, or desire additional information, please do not hesitate to contact us.

Sincerely,

Pamela T. Karlson, J.D., B.C.S.

PTK/drm

Enclosures as stated

cc: Client w/enclosures...

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION:  | AKE RACHARD H          | OMEOWNEI           | RS ASSOCIATION, INC.   |
|---|------------------------|--------------------|--|
| N06000009709 DOCUMENT NUMBER:   |                        |                    |  |
| The enclosed Articles of Amendment and fee are subm                   | itted for filing.      |                    |  |
| Please return all correspondence concerning this matter               | to the following       |                    |  |
| PAMELA T. KARLSON, ESQ.   |                        |                    |  |
| (   | Name of Contact Per    | son)               |  |
| KARLSON LAW GROUP, P.A.   |                        |                    |  |
|   | (Firm/ Company)        |                    |  |
| 301 DAL HALL BOULEVARD  |                        |                    |  |
|   | (Address)              |                    |  |
| LAKE PLACID, FL 33852   |                        |                    |  |
| (   | City/ State and Zip Co | ode)               |  |
| INFO@KARLSONLAW.COM   |                        |                    |  |
| E-mail address: (to be used to  | or future annual repo  | rt notification    | )  |
| For further information concerning this matter, please c              | all:                   |                    |  |
| DAVID R. MAINS, PARALEGAL   |                        | 863-465-5033       |  |
| (Name of Contact Person)  | <del> </del>           |                    | (Daytime Telephone Number)                                       |
| Enclosed is a check for the following amount made pay                 | able to the Florida De | epartment of S     | State:   |
| \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status |                        | Certifi<br>Certifi | Filing Fee<br>cate of Status<br>ed Copy<br>ional Copy is<br>sed) |
| Mailing Address Amendment Section                                     | Ame                    | et 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

FILED

| THE VILLAGE ON LAKE RACHARD HOME  | OWNERS ASSOCIATION, INC.                              | Batt o'c                                  |  |  |  |
|---|---|---|--|--|--|
| (Name of Corporatio   | n as currently filed with the Flor                    | ida Dept. of State) 9 PH 3: 00            |  |  |  |
| N06000009709  |   | SCORETARY OF STATE                        |  |  |  |
| (Docu   | ment Number of Corporation (if kr                     |   |  |  |  |
| Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation: | orida Statutes, this <i>Florida Not For</i>           | r Profit Corporation adopts the following |  |  |  |
| A. If amending name, enter the new name of th   | e corporation:  |   |  |  |  |
| N/A   |   | The new                                   |  |  |  |
| name must be distinguishable and contain the wor<br>"Company" or "Co." may not be used in the nan |   |   |  |  |  |
| B. Enter new principal office address, if applic  | 1943 MARAVILLA A                                      | AVENUE                                    |  |  |  |
| (Principal office address <u>MUST BE A STREET</u> )   |   | )1  |  |  |  |
|   |   |   |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE                | BOX) 1943 MARAVILLA A                                 | AVENUE                                    |  |  |  |
|   | FT. MYERS, FL 3390                                    | )1  |  |  |  |
|   |   |   |  |  |  |
| D. If amending the registered agent and/or registered agent and/or the new registered.            |   | enter the name of the                     |  |  |  |
| Name of New Registered Agent:   | PAMELA T. KARLSON, ESQ.                               |   |  |  |  |
|   | 301 DAL HALL BOULEVARD                                |   |  |  |  |
| New Registered Office Address   |   | rida street address)                      |  |  |  |
|   | LAKE PLACID   | , Florida 33852                           |  |  |  |
|   | (City)  | (Zip Code)                                |  |  |  |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen  | Registered Agent: nt. I am familiar with and accept t | he obligations of the position.<br>The    |  |  |  |
| •   | Signature of New Registe                              | red 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 <math>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>Mik</u> | n Doe<br>te Jones<br>y Smith |                           |
|----------------------------------|---------------------|------------------------------|---------------------------|
| Type of Action<br>(Check One)    | <u>Title</u>        | <u>Name</u>                  | <u>Addres</u> s           |
| 1) Change                        | PD                  | GREGORY L. ARNONE            | 5230 94TH PLACE           |
| Add                              |                     |                              | SEBASTIAN, FL 32958       |
| X Remove                         |                     |                              |                           |
| 2) Change                        | VPD                 | GREGORY S. KINO              | 515 N. FLAGLER DRIVE      |
| Add                              |                     |                              | WEST PALM BEACH, FL 33401 |
| X Remove                         |                     |                              |                           |
| 3 ) Change                       | PD                  | WALTER JOHNSON               | 1943 MARAVILLA AVENUE     |
| X<br>Add                         |                     |                              | FT. MYERS, FL 33901       |
| Remove                           |                     |                              |                           |
| 4) Change                        | VPD                 | JOANNA LEE CALLAHAN          | 15071 NORTH PEBBLE LANE   |
| X<br>Add                         |                     |                              | FT. MYERS, FL 33912       |
| Remove                           |                     |                              |                           |
| 5) Change                        | SD                  | CATHLEEN C. WHEELER          | 10060 SAN PABLO AVE.      |
| X Add                            | <del>-</del>        |                              | FT. MYERS, FL 33919       |
| Remove                           |                     |                              |                           |
| 6) Change                        |                     |                              |                           |
| Add                              | <del></del>         |                              |                           |
| Remove                           |                     |                              |                           |
|                                  |                     |                              | <del></del>               |

| (attach       | ending or a<br>additional | sheets,       | if neces | sary).      | (Be spe | cific)   | -10, MOI      | <u>-</u> . |          |            |                |             |                       |   |
|---------------|---------------------------|---------------|----------|-------------|---------|----------|---------------|------------|----------|------------|----------------|-------------|-----------------------|---|
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| The date of each amendment(s) adoption:  | _, it other than the |
|--|----------------------|
| date this document was signed.   |                      |
| Effective date if applicable:  |                      |
| (no more than 90 days after amendment file date)   | •                    |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records. | e listed as the      |
| 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 10715 Signature Walter Alnson  |                      |
| (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)   |                      |
| other court appointed fiduciary by that fiduciary)   |                      |
| WALTER JOHNSON   |                      |
| (Typed or printed name of person signing)  |                      |
| PRESIDENT/DIRECTOR   |                      |
| (Title of person signing)  |                      |