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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	WHISPERING RIDG ON:	E HOMEOWNERS	ASSOCIATIO	on, Inc.
DOCUMENT NUMBER:	N06000012350			
The enclosed Articles of Am	nendment and fee are subtr	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Denise Abercrombie				
		(Name of Contact Pe	rson)	
Highland Community Mana	gement	,		
		(Firm/ Company	)	
3020 S. Florida Avenue, Su	ite 305		<i>;</i>	
	, <del></del>	(Address)	<del></del>	, , , , , , , , , , , , , , , , , , , ,
Lakeland. FL 33803				
	1	(City/ State and Zip (	Code)	***
info@hemanagement.org		-		
	-mail address: (to be used	for future annual rep	ort notification	)
For further information cond	erning this matter, please	call:		
Denise Abercrombie	·	at	863	940-2863
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pay	yable to the Florida I	Department of S	State:
· ■ \$35 Filing Fee	□\$43.75 Filing Fee &   Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	D Filing Fee icate of Status ied Copy tional Copy is used)

**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

WHISPERING RIDGE HOMEOWNERS ASSOCIATION, INC.

mber of Corporation (if	known)
utes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
ation:	
**	The new
ration or incorporat	'ed" or the abbrevlation "Corp." or "Inc."
	20
<u>\$</u> )	ted" or the abbrevlation "Corp." or "Inc."  P
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lice address in Florida	a, enter the name of the
address:	
a	Florida street address)
	, Florida
(City)	(Zip Code)
d Agent:	
amiliar with and accep	t the obligations of the position
Signature of Non Desi-	otomed Annua is at
	ration:  ration" or "incorporat  S)  Gice address in Florida  address:

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 Ulv Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	P	Josh Davis	3020 S. Florida Avenue
Add			Suite 305
Remove			Lakeland, FL 33803
2) X Change	<u>v</u>	Doma Koed	3020 S. Florida Avenue
Add			Suite 305
Remove			Lakeland, FL 33803
3) Change	<u>si</u>	Kameron Benko	3020 S. Florida Avenue
X Add			Surite 305
Remove			Lakeland, FL 33803
4) Change	<u>P</u> .	Placido Rivera	3020 S. Florida Avenue
Add			Suite 305
X Remove			Lakeland, FL 33803
5) Change	<u>T</u>	Cynthia Kipp	3020 S. Florida Avenue
Add			Suite 305
X Remove			Lakeland, FL 33803
6) Change	<u>D</u>	Robert Mercado	3020 S. Florida Avenue
Add			Suite 305
X Remove	•		Lakeland, FL 33803

I amending or adding attach additional sheets,	if necessary).	(Be specific)	_			
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•	April 20, 2020	•
The date of each amendment	· · · · · · · · · · · · · · · · · · ·	, if other than the
date this document was signed.	•	
	April 20, 2020	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	us block does not meet the applicable statutory filing requirements, this date will not he Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	were 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 d	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated April	20, 2020	
. / 1		
Signature		<del></del>
(LDY IDE	chairman or vice chairman of the board, president or other officer-if directors	•
inive ti	oot been selected, by an incurporator - if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
rodies (	come appointed inductary by that inductary)	
. Josí	h Davis	
· <u>·</u>	(Tringel or estable source of source starter)	
	(Typed or printed name of person signing)	
Pre	sid <u>e</u> nt ·	
<del></del>	(Title of person signing)	