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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Chassa Oaks RV Res	ort Condominium A	ssociation Inc.	
DOCUMENT NUMBER:	N07000000275			
The enclosed Articles of An				
Please return all correspond	ence concerning this matte	r to the following:		
Raymond Raptis				
		(Name of Contact Pe	erson)	
Chassa Oaks RV Resort Co	ndominium Association In	c.		
		(Firm/ Company	·)	
1100 S Suncoast Blvd.				
71		(Address)		
Homosassa, Fl. 34446				
	((City/ State and Zip (Code)	
chassatreas@gmail.com				
Ţ.	-mail address: (to be used	for future annual rep	ort notification)
For further information conc	erning this matter, please of	call:		
Raymond Raptis		at	860	655-4628
. <u>.</u>	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of S	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee a Certified Copy (Additional copy is enclosed)	Certifi Certifi	cate of Status ed Copy ional Copy is
Mailing A	ddress	Str	eet 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

Chassa Oaks RV Resort Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N07000000275 (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: 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: (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: , Florida (Zip Code) 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 <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>M</u>	hn Doc ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	P	Clyde Johnson	9045 Gaylor Street
Add X Remove			Spring Hill, FL 34446
2) X Change	P	Ed Koppelman	20 Bells of Ireland Court
Add			Homosassa< FL 34446
3) Change	<u>v</u>	Drew Melkonian	PO Box 429
X Add Remove			Homosassa Springs, 34447
4) Change	<u>s</u>	Peggy Tragesser	11000 S Suncoast Blv. Lot #1
Add X Remove			Homosassa, FL 34446
5) Change	<u>S</u>	Barbara Mccorkhill	6040 W Dorset Drive
Add Remove			Crystal River, FL 34429
6) Change			
Add			
Remove			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)						
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The	May 2, 2019 date of each amendment(s) adoption:	other than the
Effe	tive date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Not doc	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list nent's effective date on the Department of State's records.	sted as the
Ado	otion 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 July 19, 2019	
	Signature Ao Chitch (Epollman	
	(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)	
	Ed Koppelman	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	