N07000001671

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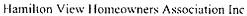
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	HOMEOWNERS	ASSOCIATION	INC	
DOCUMENT NUMBER:				` <i>ယ</i>
The enclosed Articles of Amendment and fee are subm	nitted for filing.			
Please return all correspondence concerning this matter	to the following:			4: 5
Denise Abercrombie				1
	(Name of Contact I	Person)		<u>.</u>
Highland Community Management, LLC				
······································	(Firm/ Compar	ny)		!
3020 S. Florida Ave., Suite 305				!
	(Address)			
Lakeland, FL 33803				
	City/ State and Zip	Code)		-
info@hcmanagement.org				
E-mail address: (to be used	for future annual re	port notification	n)	
For further information concerning this matter, please of	eall:			
Denise Abercrombie	а	863	940-2863	
(Name of Contact Person)			(Daytime Tele	phone Number)
Enclosed is a check for the following amount made pay	able to the Florida	Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C 20	treet Address mendment Sectivision of Corpo lifton Building 661 Executive Coallabasson, FL 3	orations Center Circle	

Articles of Amendment to Articles of Incorporation of



N07000001671

MIN Way (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)

amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the c	corporation:	
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	'corporation" or "incorporated" o	The new r the abbreviation "Corp." or "Inc."
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 BO	<u>OX</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		er the name of the
Name of New Registered Agent:		
<u>New Registered Office Address:</u>	(Florida	a street address)
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the	obligations of the position.
	Signature of New Registered	l Agent, if changing

Page 1 of 4

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	PT John I V Mike : SV Sally 5	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>VP</u>	Jose B. Rodriguez	P.O. Box 228
Add			Lake Hamilton, FL 33851
Remove			
2) X Change	P	George Conlin	P.O. Box 249
Add			Lake Hamilton, FL 33851
Remove			
3) Change	P	Haward J. Shelton, Sr	P.O. box 616
Add			Lake Hamilton, FL 33851
X Remove			
4) Change	ST	Ann Conlin	P.O. Box 249
X Add			Lake Hamilton, FL 33851
Remove			
5) Change			
Add			
Remove			
6) Change			,
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)				
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7/26/17	
The date of each amendment(s) adoption:	_, if 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 document's effective date on the Department of State's records.	be 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 Signature Purhaphana Asia a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid at a shareful filling a hairman falls hand maid a shareful filling a shareful fill	_
(By the chairman of 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)	
George Conlin	
(Typed or printed name of person signing)	
President	
(Title of person signing)	