N07000002913

· .
(Requestor's Name)
(Address)
(Address)
Southern Meadows Community A 6/0 Flynn Vickers 4645 Executive Meadows Dr. Plant City, FL 33567
(Document Number)
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TO: Amendment Section **Division of Corporations**

Southern Meadows Community Association, Inc. IAME OF CORPORATION:					
N07000002913 OCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
(Name of Contact Person)					
4645 Executive Meshows DI					
Plant City, FL 33567					
(City/ State and Zip Code) Vickers & Grain Com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
Flyn Vickors (Name of Contact Person) at 863 - 205-7589 (Area Code) (Daytime Telephone Number)					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)					
Mailing Address Street 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

Articles of Incorporation ...

Southern Meadows Community Association, Inc. (Name of Corporation as currently filed with the Florida N07000002913 (Document Number of Corporation (ignown) 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: 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. ew Registered 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.

X Change PT X Remove Y X Add SV		PT V SV	John Doe Mike Jones Sally Smith	
Type of (Check (<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	Change	PD	D. Joel Adams	3020 S. Florida Ave., Suite 101
	Add			Lakeland, FL 33803
<u>X</u>	Remove		•	
2)	Change	VD	Robert J. Adams	3020 S. Florida Ave., Suite 101
	Add		•	Lakeland, FL 33803
<u>X</u>	Remove		•	
3)	Change	STD	Stacy Allison	3020 S. Florida Ave., Suite 101
	Add			Lakeland, FL 33803
4)	Remove Change	PD	Reggie Watson	4638 Executive Mendows Dr.
<u>x</u>	Add Remove		$\Omega = 0$	33567 PC
5) <u>x</u>	Change Add	VD	Taul Walton	4644 Executive Medows Dr. Plant City, FL
6)	Remove Change	STD	Flynn Vickers	4645 Executive Medows Dr. Plant City, FL
<u>x</u>	_Add Remove		1	Plant City FL 33567

E. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)
N/A	
<u>.</u> .	
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	date of each amendment this document was signe		, if other than the
Effe	ective date <u>if applicable</u>	(no more than 90 days after amendment file date)	
		this block does not meet the applicable statutory filing requirements, this the Department of State's records.	is date will not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/was/were sufficient for	were adopted by the members and the number of votes cast for the ame approval.	ndment(s)
	There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) w f directors.	as/were
	Dated	8/8/2015	
	Signature	Typen Val	
	have	the chairman or vice chairman of the board, president or other officer-if and been selected, by an incorporator — if in the hands of a receiver, truer court appointed fiduciary by that fiduciary)	
	_	Tynn Vicket 5 (Typed or printed name of person signing)	
	ر ع	Secretary Treasure & and Director (Title of person signing)	