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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>SULPIN IY</u>	nerset Estates Property Oco,	<u>ne</u> r
DOCUMENT NUMBER: NOTOC	nerset Estates Property Ocol 20003667 Association	n (r
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Do	(Name of Contact Person)	
	(Firm/ Company)	<u>.                                    </u>
4200 s	SE44 Ave. Rd. (Address)	
	(City/ State and Zip Code)	<del></del>
	a Co am and the code of the consumer of the consumer of the consumer of the code of the co	
For further information concerning this matter, plea	ease call:	
Dorothy Riambi	rson) at 353 343 486  (Area Code) (Daytime Telephone Number)	18
Name of Contact Pers	rson) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:	
\$35 Filing Fee	e & \$\subseteq\$\$\$ \$\subseteq\$\$\$\$ \$\subseteq\$\$\$\$ \$\subseteq\$\$\$\$ \$\subseteq\$\$\$\$\$\$\$\$ \$\subseteq\$	
Mailing Address	Semant Adduses	

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

Articles of Incorporation

	of
<u>Jummerset Estate</u> (Name of Corporation as curren	es Property Owners 1+550c1@t7
NO700003	
	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	3904 SE 22nd Street
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	OcalaFL 34471
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3904 SE 22 not Street
	<u> OCala FC 34471</u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the
Name of New Registered Agent: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· 5 1
New Registered Office Address:	3904 5E 22, nd Street (Florida street address)
	Cela Florida 34471 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	<u>sgent:</u>
I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of the position.
Sig	nature of New 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.

Example: X Change X Remove X Add	<u>V</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	4	<u>Addres</u> s
1) Change Add Remove	DI	Harvey W. V.	<u>ande</u> um _ - -	<u>4260 NE 35</u> Street Cula FC 34479
2) Change Add	5_	<u>Catherine</u> n	n.Vandele -	<u>2095E415t</u> Avenu. <u>CalaFL'38471</u>
X Remove 3 ) Change	P	Michael T	Peterson_ -	3904 SEJOND STree ChalaFL 34471
4) Change Add Remove	T	Henry All		2103 SE 39th Avenue Ocala FC 34471
5) Change Add Remove	<u>5</u> _	Dorothy Ric	<u>ullia</u> _	<u>4200 SE 44th</u> Ave Rd <u>Chala FC 344</u> 80
6) Change <u>&gt;</u> Add Remove	D	Shirley R	<u>-</u>	2031 SE 3941 Avenue ChalaFL 34471
			_	

The date of each amendment(s) adoption:
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 listed as the document's effective date on the Department of State's records.
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 3/25/18 Signature Signature
(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)
(Typed or printed name of person signing)
President (Title of person signing)