

(Re	equestor's Name)					
(Ad	ldress)					
(Ac	idress)					
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Ві	usiness Entity Nar	ne)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						
	,					
		1				

Office Use Only



800299627038

05/30/17--01010--015 **35.00



R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	BERKLEY RESERV	'E HOMEOWNERS	ASSOCIATIO	ON, INC.	
DOCUMENT NUMBER:	N07000004628				
The enclosed Articles of An	nendment and fee are subn	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
Denise Abercrombie					
	<u> </u>	(Name of Contact Pe	erson)		
Highland Community Mana	gement, LLC				
		(Firm/ Company	')		
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 rep	ort notification)	
For further information conc	erning this matter, please of	call:			
Denise Abercrombie		at	863	412-6144	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida D	Department of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing A	ddwaaa	C4			

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

17 MAY 20 FH 1:54

BERKLEY RESERVIE HOMEOWNERS ASSOCIATION,	INC		* * *
(Name of Corporation as curren	tly filed with the Florida De	pt. of State)	*** 2 **
N07000004628			
(Document Number	er of Corporation (if known)		
dursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profi</i>	t Corporation adopt	s the followin
If amending name, enter the new name of the corporati	on:		
			The nev
ame must be distinguishable and contain the word "corporat Company" or "Co." may not be used in the name.	ion" or "incorporated" or th	e abbreviation "Con	rp." or "Inc."
. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRESS</u>)			
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
. If amending the registered agent and/or registered offic	e address in Florida, enter	the name of the	
new registered agent and/or the new registered office a			
Name of New Registered Agent:			
	(Florida etc	reet address)	
New Registered Office Address:	(1 tortue sir	cer anaress,	
		El anida	
	(City)	, Florida (Zip Code	•)
		,—. <u></u>	,
ew Registered Agent's Signature, if changing Registered		liantiana afaba	iou
hereby accept the appointment as registered agent. I am far	nitiar wiin ana accept the obt	igations of the posit	wi.
	anature of New Registered A	cout if abouting	
N)	DEDITION OF THE PROPERTY OF A	oral urnanama	

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	$\underline{\mathbf{V}}$ $\underline{\mathbf{M}}$	ohn <u>Doe</u> like Jones ally Smith	
Type of Action (Check One)		<u>Name</u>	<u>Addres</u> s
1) Change	P	D. JOEL ADAMS	3020 S. Florida Ave., Suite 101
Add			Lakeland, FL 33803
X Remove			
2) Change	VP	ROBERT J ADAMS	3020 S. Florida Ave., Suite 101
Add			Lakeland, FL 33803
X Remove			
Change	ST	BRIAN WALSH	3020 S. Florida Ave., Suite 101
, S Add			Lakeland, FL 33803
X Remove			
4) Change	P	CHRIS ZUCKERMAN	1570 Shorewood Drive
X Add			Auburndale, FL 33823
Remove			
5) Change	VP	WAYNE GOURLEY	1436 Shorewood Drive
X Add			Auburndale, FL 33823
Remove			
6) Change	ST	JENNIFER ONEY	1470 Shorewood Drive
X Add			Auburndale, FL 33823
Remove			

attach additional sheets, if nec	essary). (Be spec	cific)		
			 	
	<u> </u>			
			 <u> </u>	
	.		 	
-			 	
_				

		3-18-17	
	date of each ame this document was	ndment(s) adoption:signed.	, if other than the
Effec	tive date <u>if appli</u>	5-18-17 cable:	
D	THE TANKE	(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Adoj	otion of Amendm	ent(s) (CHECK ONE)	
	The amendment(s was/were sufficier) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no ment adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	5-19-17	
	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)	
		Chris Zuckerman	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	