NO7 0000000201

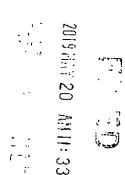
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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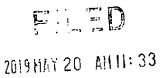
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	St. James Crossin N:	g		_	
	07000006201				
DOCUMENT NUMBER: _					
The enclosed Articles of Ame	ndment and fee are subm	nitted for filing.			
Please return all corresponden	ce concerning this matter	r to the following:			
		Denise Abercro	mbie		
		(Name of Contact I	Perso	n)	
	Highla	nd Community Ma	ınage	ment	
	 .	(Firm/ Compar	ny)		
	3020) S. Florida Ave. S	uite 3	05	
		(Address)			
		Lakeland, FL 3	3803		
	(City/ State and Zip	o Cod	e)	
	ir	nfo@hcmanagemer	nt.org		
E-1	mail address: (to be used	for future annual re	eport	notification)
For further information conce	ming this matter, please o	:all:			
Denise Abererombie		ě	ıŧ	863	940-28 6 3
(i	Name of Contact Person)		(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the fol	lowing amount made pay	able to the Florida	Depa	artment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifī Certifī	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Ad	dress	<u>s</u>	treet	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



ST. JAMES CROSSING HOMEOWNERS ASSOCIATION, INC.

21 22	5	
	currently filed with the Florida Dept. of State)	· i
N0700006201	·	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the	e following
A. If amending name, enter the new name of the cor	poration:	
		T/1
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp."	The new or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		
Name of New Registered Agent:	-	
<u>New Registered Office Address</u> :	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent: 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 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: XChange X Remove X Add	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Michael Roche	1604 Greenwood Blvd - Ste 124
Add			Lake Mary, Fl. 32746
X Remove			
2) Change	VD	David Robling	1604 Greenwood Blvd - Ste 124
Add			Lake Mary, FL 32746
X Remove			
3) Change	P	Rocky Chiofar	3020 S. Florida Ave., Ste 305
X Add			Lakeland, FL 33803
Remove			
4) Change	<u>V</u>	Gail Clark	3020 S. Flroida Ave., Ste 305
X Add			Lakeland, FL 33803
Remove			
<i>5)</i> Change	S/T	Cindy Brown	3020 S. Florida Ave., Ste 305
X Add			Lakeland, FL 33803
Remove			
6) Change			_
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
- 11		1			
				_,	
		-			
				 -	

The c	date of each amendment(s) adoption:		, if other than the
date t	this document was signed.		
Effec	ctive date <u>if applicable</u> :		
	(no more than !	90 days after amendment file date)	
	: If the date inserted in this block does not meet the ament's effective date on the Department of State's rec	applicable statutory filing requirements, this date will a cords.	not be listed as the
Adop	otion of Amendment(s) (CHECK ON	<u>E</u>)	
	The amendment(s) was/were adopted by the members was/were sufficient for approval.	s and the number of votes east for the amendment(s)	
	There are no members or members entitled to vote on adopted by the board of directors.	the amendment(s). The amendment(s) was/were	
	Dated <u>5-7-19</u>		
	Signature Wall		
	(By the chairman or vice mairman have not been selected, by an incoother court appointed fiduciary by	of the board, president or other officer-if directors or or or other officer of the hands of a receiver, trustee, or that fiduciary)	
	ROCKY	On printed name of person signing)	
	(Турец	or prince name or person signing)	
	Dresider	74	
	\	(Title of person signing)	