## NO700000 7443

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ALLAHASSET, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Property Holdings Hom	ieowners' Ass	ociation. INC	
N07000007443				
DOCUMENT NUMBER:			<u> </u>	
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
Belinda Ryan Wilhemson				
	(Name of Contact Per	rson)		
Empire Management Group. Inc.				
	(Firm/ Company)			
770 Almond St. Suite A				
	(Address)			
Clermont, FL 34711				
	(City/ State and Zip C	lode)		
hoa@empirehoa.com				
E-mail address: (to be use	ed for future annual repo	ort notification	)	
For further information concerning this matter, pleas	se call:			
Belinda Ryan Wilhemson	at	352	227-2100	
(Name of Contact Perso		(Area Code)	(Daytime Telephone Number	7)
Enclosed is a check for the following amount made	payable to the Florida D	epartment of	State:	
S35 Filing Fee S43.75 Filing Fee & Certificate of Status		Certif Certif	O Filing Fee cate of Status ed Copy is sed)	
Mailing Address		eet Address		
Amendment Section Division of Comporations		endment Sections of Como		
DIVISION OF CAUTORIUMS	1717	Laivii of Culli	01 ALIO 113	

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

Barrington Estates Property Holdings Homeowners' Association, INC

<del></del>				-	
(Name of Corporation as cur	rrently filed with	h the Florida Dej	ot. of State)		
N07000007443					
(Document No	umber of Corpora	ation (if known)			
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes. this <i>Floria</i>	la Not For Profit	Corporation adopts the	he follo	owing
A. If amending name, enter the new name of the corpo	oration:				
n/a				The	new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "inc	corporated" or th	e abbreviation "Corp.		–
B. Enter new principal office address, if applicable:	n/a				
(Principal office address MUST BE A STREET ADDRE	<u>(SS</u> )				
		<del></del>			
C. Enter new mailing address, if applicable:	n/a		SE	19	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			्राह्य संख्	<u>=</u>	<del></del> -
			31 201	ig -	1,1
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	<del></del>		77	<u> </u>	
D. If amending the registered agent and/or registered		ı Florida, enter t	he name of the	<u>ö</u>	_
new registered agent and/or the new registered offi	ice address:			ţ	
Name of New Registered Agent: 11/a					
New Registered Office Address:		(Florida stre	eet address)		
			mi da		
<del></del>	(City)		Florida (Zip Code)		
	•		·		
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	e <b>red Agent:</b> m familiar with a	nd accept the obl	igations of the position	1.	
	*	•			
	Signature of N	lew Registered Ag	gent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = Chie 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. Ther 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 Char Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add	$\overline{V}$ $\overline{M}$	nn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	Laurie Guarraci	770 Almond St. Suite A
Add			Clermont, FL 34711
Remove			
2) Change	VP	Matthew Williams	770 Almond St. Suite A
Add			Clermont, FL 34711
X Remove			
3 ) Change	S/T	Jacqueline Porok	770 Almond St. Suite A
X Add			Clermont, FL 3471th
Remove			(0).
4) Change Add			ANIO: EL
Remove			
5) Change			_
Add Remove			
6) Change Add			<del></del>
Remove		D 2.4	<del></del>

(attach additional sheets, if necessary).	(Be specific)	
n/a		
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E. If amending or adding additional Articles, enter change(s) here:

	6/11/2019	
	e date of each amendment(s) adoption:e this document was signed.	_, if other than th
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not current's effective date on the Department of State's records.	be listed as the
Ado	option 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.	
<b>=</b>	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	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)	_
	Alexis Lewis	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)  ALL AHASSEE FLORIDA	