N0700008737

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TO: Amendment Section Division of Corporations

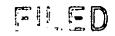
Tallahassee, FL 32314

NAME OF CORPORATION: HOAGLAND IN	DUSTRIAL PARK LANDS	ITE CONDOMI	NIUM ASSOCIATION, INC.
N07000008737 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
William Rocker			
	(Name of Contact I	Person)	
	(Firm/ Compa	ıy)	
P.O Box 700607			
	(Address)		
Saint Cloud, FL 34770			
	(City/ State and Zir	Code)	
jenimoody.rfc@gmail.com			
E-mail address: (to be	e used for future annual re	port notification	on)
For further information concerning this matter, p	olease call;		
William Rocker	2	(407)	729-1952
(Name of Contact P			(Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida	Department o	f State:
S35 Filing Fee S43.75 Filing F Certificate of St	Tee & S43.75 Filing Fe tatus Certified Copy (Additional copy enclosed)	is Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)



HOAGLAND INDUSTRIAL PARK LANDSITE CONDOMINIUM ASSOCIATION, INC.

2019 MAR 13 AM 9: 34

N07000008737		13E6.
(Document Nur	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the fol	llowing
A. If amending name, enter the new name of the corpor	ration:	
N/A	T	he new
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>)	
		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
	 	
D. If amending the registered agent and/or registered o		
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent: N/A		
New Registered Office Address:	(Florida street address)	
New Registered Office Address.		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Register		
I hereby accept the appointment as registered agent. I am	; jamuuar wun 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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	un Doc ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	s	Christopher J. Malkin	7186 21St Street East
Add			Sarasota, FL 34243
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
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5) Change			
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6) Change			
Add			
Remove			

attach additional she	ing additional Art rets, if necessary).	(Be specific)					
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	date of each amendment(s) adoption	:	_, if other than the
jate	this document was signed.		
Effe	ctive date <u>if applicable</u> :		.
	((no more than 90 days after amendment file date)	
	e: If the date inserted in this block does ument's effective date on the Departmen	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
	There are no members or members ent adopted by the board of directors.	itled to vote on the amendment(s). The amendment(s) was/were	
	Dated March 11, 2019	4-51	
	Signature	// , / / -	_
	have not been select	vice chairman of the board, president or other officer-if directors eted, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	William Rocke	r	
		(Typed or printed name of person signing)	
	Vice President		
		(Title of person signing)	