

8/21/23, 6:25 PM

# NU8 000004945

Division of Corporations  
Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : HAND ARENDALL HARRISON SALE LLC  
Account Number : 120190000128  
Phone : (850)769-3434  
Fax Number : (251)-544-1443

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ktownsend@handfirm.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
MORNINGSIDE SUBDIVISION BOARD OF STANDARDS AND  
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August 22, 2023

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MORNINGSIDE SUBDIVISION BOARD OF STANDARDS AND CONTROLS  
434 MAGNOLIA AVENUE  
PANAMA CITY, FL 32401

SUBJECT: MORNINGSIDE SUBDIVISION BOARD OF STANDARDS AND CONTROLS, INC.  
REF: N08000004945

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline

Regulatory Specialist II Supervisor

FAX Aud. #: H23000290607

Letter Number: 323A00019542

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

Morningside Subdivision Board of Standards and Controls, Inc.

NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: N08000004945

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leslie D. Sheekley, Esq.

\_\_\_\_\_  
(Name of Contact Person)

HAND ARENDALL HARRISON SALE LLC

\_\_\_\_\_  
(Firm/ Company)

35008 Emerald Coast Parkway, Suite 500

\_\_\_\_\_  
(Address)

Destin, FL 32541

\_\_\_\_\_  
(City/ State and Zip Code)

lsheekley@handfirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie D. Sheekley

850 650-0010  
\_\_\_\_\_  
(Area Code) (Daytime Telephone Number)

\_\_\_\_\_  
(Name of Contact Person)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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 CLERK OF STATE  
 TALLAHASSEE, FL

Articles of Amendment  
to  
Articles of Incorporation  
of

MORNINGSIDE SUBDIVISION BOARD OF STANDARDS AND CONTROLS, INC.

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

N08000004945

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

MORNINGSIDE OWNERS ASSOCIATION, INC.

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Incorporated." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

14251 Panama City Beach Parkway

(Principal office address MUST BE A STREET ADDRESS)

Panama City Beach, FL 32413

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: D.R. HORTON, INC.

14251 Panama City Beach Parkway

(Florida street address)

New Registered Office Address:

Panama City Beach

(City)

Florida 32413

(Zip Code)

New Registered Agent's Signature, If changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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TALLAHASSEE, FL

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	Emily Natalio	14251 Panama City Beach Pkwy. Panama City Beach, FL 32413
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	V	Mark Miles	14251 Panama City Beach Pkwy. Panama City Beach, FL 32413
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	ST	Dina Brown	14251 Panama City Beach Pkwy. Panama City Beach, FL 32413
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FL

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

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 Aug 21, 2023

Signature [Handwritten 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)

Kevin Todd Ashbrenner  
(Typed or printed name of person signing)

President  
(Title of person signing)

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