N08023

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O: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
GAME OF CORPORATION: Island Vista Homeown	ers Association, Inc
DOCUMENT NUMBER: <u>N 080 23</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jeannie Cade (Name of Contact Person)	
Island Vista Homeowne	rs Association, Inc
405 Mongoose Ln. (Address)	
N. Fort Myers, Fl 3. (City/ State and Zip Code)	3917
E-mail address: (to be used for future annual report notification)	DOO. COM
For further information concerning this matter, please call:	
Jeannie Cade at 813-4 (Name of Contact Person) (Area Code)	469 - 2856 (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of St	ate:
(Additional copy is Certified	nte of Status I Copy mal Copy is
Mailing Address Street Address	
Amendment Section Amendment Section Division of Corporations Division of Corpora	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

N 08023
(Name of Corporation as currently filed with the Florida Dept. of State)
Island Vista Estates Homeowners Associations, INC
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
A. If anicholing harner the new harne of the corporation
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.
B. Enter new principal office address, if applicable: 405 Monorose In.
(Principal office address MUST BE A STREET ADDRESS) N. Fort Myers F1. 33917
· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 400 [1000056.
N. Fort Myers, Fl 33917
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: Sadija Hausman
45 Monago La
(Florida Arees address)
New Registered Office Address:
N. Fort Myers, Florida 33917
(City) (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
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:

? = 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 reld. 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.

Mike Jones, V as Remov	e, and Sally Smitt	h, SV as an Add.	
Example: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	VP	Heatch Cox	189 Eland De. 10. Fort Myers, FI 33917
Remove 2) Change Add	VP	Vivian Walker	493 Eland DR N. Fort Myers, F133917
Remove 3) Remove Add Remove	_D_	John Rodriguez	47 Eland DR. N. Fort Myers, Fl 33917
4)ChangeAdd	D_	Sadija Hausman	405 Moncorse LN N. FOREMYERS, Fl 32917
Remove 5) Change Add	D	Chris Urbanski	LODO Impala N. Fort Myers, F133917
Remove 6) Change Add	D	Douglas Cade	275 Sable De D. Fort Myers, F1 3391
Remove E. If amending or additional she		rticles, enter change(s) here: (Be specific)	
* JEANNIE	CADE	P) [
Toraca	_		to thece Cour

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 8 26 2020
Signaturelane Cadl
(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)
Jeannie Cade
(Typed or printed name of person signing)
President
(Title of person signing)