N08717

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Lakes of Melbourne Homeowners Association, Inc. DOCUMENT NUMBER: N08717 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Patricia Pelc (Name of Contact Person) (Firm/ Company) 4088 Timber Trail (Address) Melbourne, FL 32904 (City/ State and Zip Code) ppelc@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at _321 327-7831 Patricia Pelc

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

(Name of Contact Person)

□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy

> (Additional copy is enclosed)

☑\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is

(Daytime Telephone Number)

Enclosed)

Mailing Address

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

Street Address

(Area Code)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED

2021 OCT 26 PM 12 46 ration 2021 OCT 26 PM 12 46

Articles of Amendment to Articles of Incorporation of

The Lakes of Melbourne Homeowners Association	n, Inc.	
(Name of Corporatio	n as currently filed with the F	orida Dept. of State)
N08717		
(Docu	ment Number of Corporation (i	known)
Pursuant to the provisions of section 617,1006, Flumendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the	ne corporation:	
Not applicable		The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan		ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	able: ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
D. If amending the registered agent and/or reg new registered agent and/or the new registe		a, enter the name of the
Name of New Registered Agent:	Damien Richards, The Richar	ds Law Group, PLLC
N D : 105 All		(Florida street address)
<u>New Registered Office Address</u>	;	
	Ormond Beach	, Florida 32175
	(City)	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered age		pt the obligations of the position.
	Signature of New Rev	istered 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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Patricia Pelc	2547 Lakes of Melbourne Dr
X Add			Melbourne, FL 32904
Remove			
2) Change	T	Martene Benoit	3959 Clubside Way
X Add			Melbourne, FL 32904
Remove	D	Janet O'Connell	3929 Seagate Dr.
3) Change X_ Add			Melbourne, FL 32904
Remove			
4)Change	D	Sara Strange	3984 Southwind Dr.
X Add			Melbourne, FL 32904
Remove			
5) Change	D	John Ragen	2045 Roayl Dr.
X Add			Melbourne, FL 32904
Remove			
6) Change			
Add			
Remove			

utach additional sheets, if n	ecessary) (Be spe	rcific)			
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The	date of each amendmen	t(s) adoption:	, if other than th
	this document was signed		
Effe	ctive date if applicable:	10/19/2021	
	<u></u>	(no more than 90 days ofter amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will no he Department of State's records.	t be listed as the
Ade	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for a	vere adopted by the members and the number of votes cast for the amendment(s) opproval.	
₩	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 10/20	0/2021	
	Signature	Patrice Pela	
	(By the	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Pa	ntricia Pelc	
		(Typed or printed name of person signing)	
	_HC	DA President	
		(Title of person signing)	