N12000004797

(Red	uestor's Name)	
•		
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(D		
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
4		
Certified Copies	Certificates	of Status
	•	
		
Special Instructions to F	Filing Officer:	
		j

Office Use Only



900239769149

09/19/12--01006--010 **35.00

08/29/12--01020--014 **35.00

PE SEP 18 PM 1:23

NC

SEP 2 1 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

Taccana	l aka Millaa	Association Inc
NAME OF CORPORATION: I OSCANA	Lake Villas	Association Inc
DOCUMENT NUMBER: N12000004	797	
The enclosed Articles of Amendment and fee are subr		
Please return all correspondence concerning this matter	er to the following:	
Dwight Saathoff		
	(Name of Contact Person)
Toscana Lake Villas Ass	sociation Inc	
	(Firm/ Company)	
5535 Osprey Isle Ln		
	(Address)	
Orlando, FL 32819		
	(City/ State and Zip Code)
dwight@pfdiusa.c		·
E-mail address: (to be used	•	notification)
For further information concerning this matter, please	call:	
Dwight Saathoff	_{at (} 407	730-9916
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2012

DWIGHT SAATHOFF TOSCANA LAKE VILLAS ASSOCIATION, INC 27 N. SUMMERLIN AVENUE ORLANDO, FL 32801

SUBJECT: TOSCANA LAKE VILLAS ASSOCIATION, INC

Ref. Number: N12000004797

We have received your document for TOSCANA LAKE VILLAS ASSOCIATION, INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

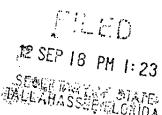
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Thelma Lewis
Document Specialist Supervisor

Letter Number: 712A00022300

Articles of Amendment to Articles of Incorporation of



Toscana Lake Villas Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N12000004797 (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: Toscana On The Lake Homeowners Association, Inc. 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: (Principal office address MUST BE A STREET ADDRESS) 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: (Florida street address) New Registered Office Address: (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.

Page 1 of 4

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		Doe 2 Jones 2 Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change				
Add				
2) Change				
Add				
3) Change				
Remove				
4) Change Add				
Remove				
5) Change				
Remove				
6) Change				
Add				

If amending or adding ad attach additional sheets, if	necessary). (E	3e specific)				
		- <u></u> -	•			
						
						_
<u>, </u>					·	
	···					
	· · · · · · · · · · · · · · · · · · ·					
					<u>.</u>	
				•		
				,		
				•••		
	,					

The date of each amendment(s) ad	loption: <u>08/22/2012</u>
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or membadopted by the board of director	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 09/06/2	2012
Signature	
have not bee	man of vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
Dwight Sa	athoff
	(Typed or printed name of person signing)
Manager	
	(Title of person signing)