N12000005440

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CYPRESS TRAIL HOME OWNERS' ASSOCIATION, INC.
DOCUMENT NUMBER: <u>N 12000005</u> 44D
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KENNETH C. NOTTURNO (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
5400 TICE STREET (Address)
(Address)
FORT MYERS, FL 33905 (City/State and Zin Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KENNETH NOTTURND at 239 784-4296 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of Status
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Articles	of Amendment	2.
Articles	to of Incorporation	
CYPRESS TRAIL HOMEOWN	OF VERS ASSOCIATION OF STATE (INC.)	LION, INC. POR
N1200005440		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Co</i>	rporation adopts the following
A. If amending name, enter the new name of the corporation	on:	
CYPRESS TRAIL RY RESORT HY name must be distinguishable and contain the word "corporation of the name."	OMEONNERS' AS	SOC ATION IN The new obreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	5400 Tice S	OTREET
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	FORT MYE	RS, FL 33905
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5400 Tree	
_	FORT MYERS	FL 33905
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		name of the
-	iui cas.	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	idress)
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered a	Agent:	
I hereby accept the appointment as registered agent. I am fam		ions of the position.
Sio	nature of New Registered Agent,	if changing
	,	and the second s

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 FST 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove		Page 2 of 4	
E. If amending or addin (attach additional shee	ig additional Art ts, if necessary).	icles, enter change(s) here:	
	** *		
· — —			
			

Page 3 of 4
The date of each amendment(s) adoption: 5/15/2020
Effective date if applicable:
(no more than 90 days after amendment file date)
<u>Note:</u> 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.

M	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 MAY 10, 2020				
	Signature Mula Des				
	(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)				
	KENNETH NOTTURNO				
	(Typed or printed name of person signing)				
	PRESIDENT				
	(Title of person signing)				