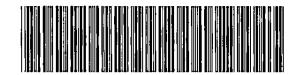
## N12000011837

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
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	COVER LETTER
FO: Amendment Section Division of Corporations	ds of Lake County Homeowners Association, Inc
	ds of Lake County Homeowners Association, Inc
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Michale Miller	
	(Name of Contact Person)
Empire Management Group, Inc	
	(Firm/ Company)
770 Almond Street, Ste A	
	(Address)
Clermont, FL 34711	
	(City/ State and Zip Code)
mmiller@empiremanagementgrp.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	, please call:
Michael Miller	352 535-0099
(Name of Contact	
Enclosed is a check for the following amount n	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of \$	Fee & S43.75 Filing Fee & Status Certified Copy (Additional copy is enclosed)  Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address

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

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

## Articles of Amendment Articles of Incorporation of

The Contract of the Contract o

The Vineyards of Lake County Homeowners Association, Inc.

## (Name of Corporation as currently filed with the Florida Dept. of State) N12000011837 (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: n/a 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: n/a (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

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> Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	ST	Daryll Pratt	770 Almond Street
Add			Ste A
x Remove			Clermont, Fl 34711
2) Change	ST	Joseph Sacco	770 Almond Street
<b>X</b> _ Add			Ste A
Remove			Clermont, Fl 34711
3 ) Change			
Add			
Remove			
Kemore			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
n/a					
<u></u>					
<del></del>					

		October 23, 2018	
	date of each amendment(s) adopti-	on:	, if other than the
late	this document was signed.		
z ee,	October 2 ective date <u>if applicable</u> :	3,2018	
2111	ettive date <u>it appricame</u> .	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block do ument's effective date on the Departn	oes not meet the applicable statutory filing requirements, this date will not nent of State's records.	be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
	The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
	There are no members or members of adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated October 24,2018		
	Signature Lemas	- Larrivee	
	By the chairman have not been se	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	_
	James Larrive	re	
		(Typed or printed name of person signing)	
	President		
		(Title of person signing)	

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