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Amend

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I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Countryside at Welleby F NAME OF CORPORATION:	domeowners Association, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to t	the following:
Nidia Repinski	~
(Vidia Rephisk)	
(Nar	me of Contact Person)
	(Firm/ Company)
	trinin Companyi
8455 W. Oakland Park Blvd	
	(Address)
Ft. Lauderdale Ft. 33351	
(City	// State and Zip Code)
countrysideatwellebysunrise@gmail.com	
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please call:	
Matthew Goode	954 523-3888
(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:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$4  Certificate of Status Ce	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	Articles	of Incorporation	ASE MON	Ŕ
Countryside at Welleby Homeowners Association	, Inc.	•	Dept. of State)	` <b>∢</b> 5
(Name of Corporation	as current	tly filed with the Florida	Dept. of State)	جج
N12023	_			
(Docum	nent Numbe	er of Corporation (if know	/n) ///	÷—
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For Pi</i>	rofit Corporation adopts the follo	owin
A. If amending name, enter the new name of the	corporati	on:-		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" o		e nev Inc."
B. Enter new principal office address, if applica	hle:	8455 West Oakland Park	: Blvd	
(Principal office address MUST BE A STREET A		Ft. Lauderdale FL 33351		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )	PO BOX 451497		
		Ft. Lauderdale, FL 3334;	5-1497	
D. If amending the registered agent and/or registered agent and/or the new register			er the name of the	
Name of New Registered Agent:	Rhonda Hollander, PA			
	314 South	Federal Highway		
Vince Propriet and Others Address		tFlorid.	a street address)	
<u>New Registered Office Address:</u>	Dania Bea	ach	. 33004	
	- Tama Oca	(City)	Florida (Zip Code)	<del></del>
New Registered Agent's Signature, if changing b	legistered	Agent:		
I hereby accept the appointment as registered agen			obligations of the position.	

Page 1 of 4

Thomas Hollander PA

## 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>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Michael Tierney	PO BOX 451497
Add			Ft. Lauderdale, FL 33345-1497
Remove			
2) X Change	TD	Kerece Richardson	PO BOX 451497
Add			Ft. Lauderdale, FL 33345-1497
Remove			
3) Change	SD	Maria Martinez	PO BOX 45197
X Add			Ft. Lauderdale, FL 33345-1497
Remove			
4) Change	PD	Nidia Repinski	PO BOX 45197
Add			Ft. Lauderdale, FL 33345
X Remove			
5) Change	<del></del>	_	
Add			
Remove			·
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
					-	
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The date of each amendment(s) a late this document was signed.	doption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the amendment(s) al.
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated October 22	2018/
Signature July	I down
haye not be	rman or 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)
	Michael Tierney (Typed or printed name of person signing)
	Phase out
	(Title of person signing)