

(Reque	stor's Name)	
(Addres	s)	
(Addres	s)	<u> </u>
(City/St	ate/Zip/Phone #)	
	WAIT	MAIL
(Busine	ss Entity Name)	
(Docun	nent Number)	
Certified Copies	Certificates of Sta	tus
Special Instructions to Filir	g Officer:	

900320109869

10/29/18--01012--002 **35.00



Office Use Only

C. GOLDEN KOV - 1 2018

. COVER LETTER TO: Amendment Section **Division of Corporations** SUNDANCE PLACE HOMEOWNERS ASSOCIATION, INC. NAME OF CORPORATION: N14000002147 DOCUMENT NUMBER: ____ _____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DENISE ABERCROMBIE (Name of Contact Person) HIGHLAND COMMUNITY MANAGEMENT, LLC (Firm/ Company) 3020 S FLORIDA AVE., SUITE 305 (Address) LAKELAND, FL 33803 (City/ State and Zip Code) info@hcmanagement.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Denise Abercrombie 863 940-2863 at (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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

SUNDANCE PLACE HOMEOWNERS ASSOCIATION, INC.

...

(Name of Corporation as currently filed with the Florida Dept. of State)

N1400002147

.

(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:

		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorpor	ated" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u></u>	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ida, enter the name of the
Name of New Registered Agent: N		
		(Florida street address)
<u>New Registered Office Address</u> :		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	d 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

2018 OCT 29 PM 4: 40

SEGREDARY OF STATE TALLAHASSEE, FL

ς.

.

.

-- -

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 = Scoretary; 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP,D	BONNEY, KERSTIEN	3020 S. Florida Ave.
Add			Suite 305
X Remove			Lakeland, FL 33803
2) Change	VP, D	VALDES. MICHAEL	3020 S. Florida Ave.
× Add			Suite 305
Remove			Lakeland, FL 33803
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			····
Add			
Remove			
6) Change	<u>. </u>		
Add			
Remove			

,

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

NA				
	 <u> </u>			
	 	-		
	 i			
			· · ·	
			-	
	 ·			
	 		·	
<u></u>	 			

Page 3 of 4

The date of each amendment(s) adoption:	•	, if other than the
 date this document was signed. 		

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: 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.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

10/18/2018 Dated Signature .i.l

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)

Timothy Schlehuber (Typed or printed name of person signing) President

(Title of person signing)