N1500000 51do

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

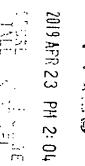
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R. WHITE APR 2 2 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2019

JENNIFER BRYANT 503-B SULLIVAN ST. NW HOUSTON MANOR HOA, INC. FORT WALTON BEACH, FL 32547

SUBJECT: HOUSTON MANOR HOME OWNERS ASSOCIATION INC

Ref. Number: N15000000566

We have received your document 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):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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.

Susan Tallent Regulatory Specialist II

www.sunbiz.org

Letter Number: 219A00007649

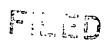
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Houston Manor Ho	me Owners Asso	ciation, Inc.	
DOCUMENT NUMBER:	N15000000566			
The enclosed Articles of Am	ienameni and tec are suon	mitted for ming.		
Please return all corresponde	ence concerning this matte	er to the following:		
Jennifer Bryant				
		(Name of Contact	Person)	
Houston Manor Home Ov	vners Association, Inc.			
	 	(Firm/ Compa	ny)	
503-B Sullivan Street				
		(Address)		
Fort Walton Beach, FL 32	2548			
		(City/ State and Zip	Code)	
houstonmanorhoa@gmai	I.com			
E	-mail address: (to be used	for future annual r	port notification	1)
For further information conc	erning this matter, please	call:		
Kay Brock, Treasurer		i	850 u	642-6374
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida	Department of	State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A			treet Address	
	nt Section of Corporations		amendment Section of Corporation	

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 to Articles of Incorporation of



2019 AFR 23 PH 2: 04

Houston Manor Home Owners Association, Inc.	••	Store.	
(Name of Corporation as curre	ntly filed with the Flori	da Dept. of State)	
N15000000566			
(Document Num	ber of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts th	ie following
A. If amending name, enter the new name of the corporat	tion:		
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ition" or "incorporated"	or the abbreviation "Corp."	The new " or "Inc."
B. Enter new principal office address, if applicable:	503-B Sullivan Stree	t	
(Principal office address MUST BE A STREET ADDRESS) Fort Walton Beach, I	FL 32548	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	503-B Sullivan Stree	t	
	Fort Walton Beach, F	FL 32548	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office s		nter the name of the	
Name of New Registered Agent: Jonnifor	Bryant		
	ullivan Street		
N. D. C. 100 411	(Flar	ida street address)	
<u>New Registered Office Address:</u> Fort Wal	ton Beach	_, 32548	i.
	(City)	, Florida (Zip Code)	·
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:		
		7	س
S	ignature of New Register	red Agent, if changing	

Page 1 of 4

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>V</u> Mik	n Doe te Jones y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	Houston, Henry J.	876 Mande Ct.
Add			Shalimar, FL 32579
X Remove			
2) Change	P	Bryant, Jennifer	503-B Sullivan Street
X Add			Fort Walton Bch, FL 32548
Remove 3) Change	s	Enos, Andrea	109-C Glory Place
X Add			Fort Walton Bch, Ft. 32548
Remove			
4) Change	<u>T</u>	Brock, Kay C.	959 Zachary Lane
X Add			Fort Walton Bch, FL 32547
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

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

	e date of each amen e this document was	April 1, 2019 dment(s) adoption: signed.	, if other than the
Eff	ective date <u>if applic</u>	able:	
		(no more than 90 days after amendment file date)	
<u>No</u> doc	te: If the date inserte ument's effective da	ed in this block does not meet the applicable statutory filing requirements, this date will not be the on the Department of State's records.	listed as the
Adoption of Amendment(s)		nt(s) (CHECK ONE)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no memb	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
	Dated	4/19/2019	
	Signature	1-6	
		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) Jennifer Bryant	
		(Typed or printed name of person signing)	
		President, Houston Manor Home Owners Association, Inc.	
		(Title of person signing)	