

10/28/2015 3:04:38 PM

Bush Ross, P.A.

(813) 223-9620

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Division of Corporations

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N15000007591

Florida Department of State

Division of Corporations

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To:

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CEG-159310

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
VILLAS OF RIVERCREST ASSOCIATION, INC.**

Certificate of Status	0
Certified Copy	1
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OCT 29 2015

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BUSH ROSS, P.A.
ATTORNEYS AT LAW

Fax

To:	FL DOC - Corporate filings (amendments) (Business Fax)	From:	Brenda K. Holland
Fax:	(850) 617-6380	Pages:	5
Phone:		Date:	10/28/2015
Re:	Art. of Amendment (appointing o/d) Villas of Rivercrest Association, Inc. (for filing)		

- **Comments:**

Art. of Amendment (appointing o/d) Villas of Rivercrest Association, Inc. (for filing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 OCT 28 AM 9:29

Articles of Amendment
to
Articles of Incorporation
of

VILLAS OF RIVERCREST ASSOCIATION, INC.

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

N15000007591

(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 "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:

(City)

Florida

(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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P D</u>	<u>DONALD J. VELLA, JR.</u>	<u>17824 N US HWY 41</u>
<input checked="" type="checkbox"/> Add			<u>LUTZ, FL 33549</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP D</u>	<u>JEFFREY CULVER</u>	<u>17824 N US HWY 41</u>
<input checked="" type="checkbox"/> Add			<u>LUTZ, FL 33549</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>T D</u>	<u>MALCOLM HAILE, SR.</u>	<u>17824 N US HWY 41</u>
<input checked="" type="checkbox"/> Add			<u>LUTZ, FL 33549</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>S D</u>	<u>NORMA VOLKERT</u>	<u>17824 N US HWY 41</u>
<input checked="" type="checkbox"/> Add			<u>LUTZ, FL 33549</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>D</u>	<u>A. PRESTON CAMERON</u>	<u>17824 N US HWY 41</u>
<input checked="" type="checkbox"/> Add			<u>LUTZ, FL 33549</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

[illegible]

DIVISION OF REVENUE

The date of each amendment(s) adoption: OCTOBER 22, 2015 15 OCT 28 AM 9:29, 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.

Dated OCTOBER 26, 2015

Signature 
(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)

DONALD J. VELLA, JR.

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)