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R. WHITE

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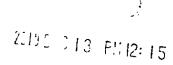
TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ENTER PROPER	TY OWNERS	ASSOCIATION, INC.
N15000009426 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitt	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
CHARLES W. BROWN, JR., ESQUIRE			
(N	ame of Contact Per	rson)	
CRABTREE LAW GROUP, P.A.			
	(Firm/ Company))	
8777 SAN JOSE BLVD., SUITE 200, BUILDING A			
	(Address)		
(C	ity/ State and Zip C	lode)	<u></u>
JACKSONVILLE, FL 32217			
E-mail address: (to be used for	r future annual repo	ort notification)
For further information concerning this matter, please cal	l:		
CHARLES W. BROWN, JR., ESQUIRE	at	907	732-9701
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	ole to the Florida D	epartment of S	tate:
(\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section	Am	eet Address endment Section	

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

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

Articles of Amendment to Articles of Incorporation of



LAKE MONROE 1-4 CENTER PROPERTY OWNERS' ASSOCIATION, INC.

(Name of Corporation	as currently filed w	ith the Florida Der	ot. of State)	
N15000009426				
(Docum	nent Number of Corp	oration (if known)		
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Flo</i>	rida Not For Profit	Corporation adopts the following	
A. If amending name, enter the new name of the	corporation:			
			The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ncorporated" or the	e abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applica	8777 Sar	8777 San Jose Blvd, Suite 200, Building A		
(Principal office address MUST BE A STREET A	DDRESS) Jacksonv			
		·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	8777 Sar	n Jose Blvd, Suite 20	00, Building A	
		rille, FL 32217		
D. If amending the registered agent and/or regis	stered office address	in Florida, enter t	he name of the	
new registered agent and/or the new register				
Name of New Registered Agent:	CHARLES W. BRO)WN, JR.		
	8777 SAN JOSE BI	LVD., SUITE 200, E	BUILDING A	
New Bester of Office Address		(Florida stre	et address)	
New Registered Office Address:	JACKSONVILLE		32217	
		<u></u>	, Florida (Zip Code)	
	(City)		(zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen		and accept the obli	gations of the position.	
/-	Signature o	New Registered Ag	ent, 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: XChange X Remove X Add	<u>V</u> <u>Mik</u>	a Doe e Jones v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PTVPSI	DAVID HODGMAN	4260 CHURCH STREET #1340
Add X Remove			SANFORD, FL 32771-8877
2) Change	PTD	NODIRBEK TALIPOV	8777 SAN JOSE BLVD., STE 200
X Add			JACKSONVILLE, FL 32217
3) Change	VPD	DILSHOD MIKHMANOV	8777 SAN JOSE BLVD., STE 200
X Add Remove			JACKSONVILLE, FL 32217
4) Change	VP	ALEX JEREZ	8777 SAN JOSE BLVD., STE 200
X Add Remove			JACKSONVILLE, FL 32217
5) Change	SD	DONALD MYERS	8777 SAN JOSE BLVD., STE 200
X Add			JACKSONVILLE, FL 32217
Remove			
6) Change			
Add			
Remove			

If amending or adding additional A (attach additional sheets, if necessary	y). (Be specific)			
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	this document was	ndment(s) adoption:, if other than the signed.	ıe
Eff	ctive date <u>if appli</u>	cable:	
		(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ate on the Department of State's records.	
Ado	ption of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient) was/were adopted by the members and the number of votes east for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	NOVEMBER 19, 2019	
	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)	
		(Typed or printed name of person signing)	
		President (Title of person signing)	
		(, me as become signing)	