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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	EADOWS PHASE 3B H	OMEOWNERS ————	GASSOCIATION, INC.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following:		
Denise Abercrombie			
	(Name of Contact P	erson)	
Highland Community Management, LLC			
	(Firm/ Compan	y)	
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 re	port notification)
For further information concerning this matter, pl	ease call:		
Denise Abercrombie	а	863	940 2863
(Name of Contact Pe			(Daytime Telephone Number)
Enclosed is a check for the following amount man	de payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	ee & S43.75 Filing Fee atus Certified Copy (Additional copy enclosed)	Certifi is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address			
Amendment Section Division of Corporations		mendment Secti ivision of Corpo	
27 or Corporations			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

HIGHLAND MEADOWS PHASE 3B HOMEOWNERS ASSOCIAITON, INC.

(Name of Corporation as cur	rently filed with the Flor	rida Dept. of State)	
N16000008596			
(Document Nu	mber of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts th	ne following
. If amending name, enter the new name of the corpo	ration:		
			The new
name must be distinguishable and contain the word "corpo Company" or "Co." may not be used in the name.	pration" or "incorporated	d" or the abbreviation "Corp.	or "Inc."
 Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u> 	<u></u>		
		<u> </u>	A01 6107
			AOi
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	22
			P ::
		<u>:</u>	2:
		. <u>:</u>	9
D. If amending the registered agent and/or registered of		, enter the name of the	
new registered agent and/or the new registered offic	ce address:		
Name of New Registered Agent:			
	//	lorida street address)	
New Registered Office Address:	(F	untau sireet daaress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		t the obligations of the position	,
and the second s		The political po	·=
	Signature of New Regis	tered 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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	on <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>p</u>	Kristen Anderson	1470 Woodlark Drive
X Add			Haines City, FL 33844
Remove			
2) Change	VP	Kathryn Heley-Luedtke	1540 Woodlark Drive
X Add			Haines City, FL 33844
Remove 3) Change	Sec	Mark Hill	1560 Woodlark Drive
X Add			Haines City, FL 33844
Remove			
4) Change	Treas.	Melivette Tosado Rivera	1590 Woodlark Drive
X Add			Haines City, FL 33844
Remove			
5) X Change	Dir	Rita Chenique	Rita Chenique
Add			2760 Sanderling Street
Remove			Haines City, FL 33844
6) Change	STD	Julio Salas	3020 S. Florida Ave., Suite 305
Add			Lakeland, FL 33803
X Remove			

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> <u>Mik</u>	n <u>Doe</u> te <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	STD	Amber Gil	3020 S. Florida Ave., Suite 305
Add			Lakeland, FL 33803
X Remove			
2) Change			
Add			.
Remove			
3) Change			
Add			
Remove			
4) Change			<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove		Page 2 of 4	

f amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)				
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.The date of each amend	ment(s) adoption:	_, if other than the
date this document was si	gned.	
Effective date if applica	ble:	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will not on the Department of State's records.	be listed as the
Adoption of Amendmen	t(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	vas/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no member adopted by the board	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated _	1-20-2019	
	Kusta andrean	_
h	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)	
	Kristen Anderson	
	(Typed or printed name of person signing)	
	President (Title of person signing)	