## N17000000 2342

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duning a Fability Name)
(Business Entity Name)
(Decument Museum)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200334316832

09/23/19--01008--073 \*\*35.

19 SEP 23 AM 7: 07

OCT 0 9 2019 S. YOUNG

## **COVER LETTER**

TO: Amendment Section

Division of Corporations Symmes Cove Homeowners Association, Inc. NAME OF CORPORATION: N17000002342 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 (Firm/ Company) 3020 S. Florida Ave., Suite 305 (Address) Lakeland, FL 33803 (City/ State and Zip Code) info@hemanagement.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Denise Abercrombie 940-2863 863 (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) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Symmes Cove Homeowners Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N17000002342 (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: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." "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) (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

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nat 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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, 1 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 C Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add	$\underline{\mathbf{V}}$ $\underline{\mathbf{M}}$	hn Doe ike Jones Ily Smith	1	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	PD	Adams, D. Joel	3020 S. Florida Ave.	
Add			Lakeland, FL 33803	_
X Remove			<del>-                                    </del>	_
2) Change	VPD	Adams, Robert J.	3020 S. Florida Ave.	
Add			Lakeland, FL 33803	_
X Remove 3) Change	STD	Walsh, Brian	3020 S. Florida Ave.	_
Add			Lakeland, FL 33803	_
X Remove				_
4) Change	PD	Matthew Pike	3020 S. Florida Ave.	
X Add			Suite 305	_
Remove			Lakeland, FL 33803	_
5) X Change	VPD	Robert Adams	3020 S. Florida Ave.	
X Add			Suite 305	
Remove			Lakeland, FL 33803	
6) Change	SD	Wendy Wade	3020 S. Florida Ave.	
X Add			Suite 305	_
Remove			Lakeland, FL 33803	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and tit	le, na
address of each Officer and/or Director being added:	1

(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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. 1 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 C 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 Doe ke Jones ly Smith		i
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	TD	Cynthia Lorenzo	3020 S. Florida Ave.	ı
X Add			Suite 305	
Remove			Lakeland, FL 33803	1
2) Change	D	Tammy Numan	3020 S. Florida Ave.	1
X Add		•	Suite 305	
Remove			Lakeland, FL 33803	l
3 ) Change				· · · · · ·
Add				;
Remove				
4) Change	<u> </u>			<del></del>
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		-		<del></del>
Remove				I

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
(Mach duational sheets, if necessary). (Be specific)	'
	<del></del>
	·
	i
	<del>.</del>
	·
	<del>. ,</del>
<del></del>	· . <b>_</b>
	;
	+
<del></del>	
	<del></del>

	9/10/2019 date of each amendment(s) adoption:	, if other 1
	this document was signed. 9/10/2019 tive date if applicable:	
	(no more than 90 days after amendment file date)	
	: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r ment's effective date on the Department of State's records.	ot be listed as
Ado	otion 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.	1
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	ı
	Dated 9/10/19	
	Signature Matt	
	(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)	ı
	Board President (Title of person signing)	