## N 1700000 8049

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	<del></del>
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
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Certified Copies	Certificates of	Status
'		
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Special Instructions to	Filing Officer:	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Payne Park Village Ho		tion, Inc.	
N'	17000008049			
DOCUMENT NUMBER:				<del></del>
The enclosed Articles of America	dment and fee are submi	tted for filing.		
Please return all correspondence	e concerning this matter	to the following:		
Amy Windmiller				
	(i	Name of Contact Pe	rson)	
Keating & Schlitt, P.A.				
•		(Firm/ Company	)	
250 East Colonial Drive, Suite	300			
		(Address)		
Orlando, Florida 32801				
	((	City/ State and Zip (	Code)	
awindmiller@keatlaw.com				
E-m	iail address: (to be used f	or future annual rep	ort notification	)
For further information concern	ning this matter, please ca	all:		
Amy Windmiller		at	407	206-9424
(N	ame of Contact Person)	at ,	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the foll	owing amount made paya	able to the Florida E	epartment of S	State:
☐ \$35 Filing Fee 【	□S43.75 Filing Fee & ■ Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ed Copy cional Copy is used)
Mailing Adv	lugge	C.		

Mailing Address

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

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

## Articles of Amendment to Articles of Incorporation of



Payne Park Village Homeowners Association, Inc.

(Name of Corporation	n as currently	filed with the F	orida Dept. of State)
N17000008049			
(Document)	ment Number o	of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, t	his <i>Florida Not i</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	<u>.</u>	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		" or "incorpora	
<del>-</del>		/A	
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET)			
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> ) N	/A	
		•	
	_		
D. If amending the registered agent and/or regi			a, enter the name of the
new registered agent and/or the new register	red office addi	<u>'ess:</u>	
Name of New Registered Agent:	N/A		
V . B 100			(Florida street address)
New Registered Office Address			
	N/A		, Florida
	(	(City)	(Zip Code)
New Registered Agent's Signature, if changing l	Pagistared Ag	ant:	
hereby accept the appointment as registered ager			pt the obligations of the position.
-	Sierne	utura of Nav Rau	istored 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	PT         John De           V         Mike Jo           SV         Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Jeff Waddle	6567 Gunn Highway
Add			Tampa, F1, 32625
X Remove			
2) Change	PD	James Oriol	6567 Gunn Highway
X Add			Tampa, FL 32625
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A ·			
		<u></u>	
		<del>-</del>	<del></del>
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			<del> </del>
			<u>.</u>

	e date of each amer this document was		ption:	, if other than the
	ective date if appli	N/A		
		-	(no more than 90 days after amendment file date)	
			x does not meet the applicable statutory filing requirements, this date will artment of State's records.	I not be listed as the
١d٠	option of Amendm	ent(s)	(CHECK ONE)	
	The amendment(s) was/were sufficier		pted by the members and the number of votes cast for the amendment(s)	
=	There are no mem adopted by the bo		rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated	November \_	<u>O</u> , 2017	
	Signature		· K	
		have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or epointed fiduciary by that fiduciary)	
		Kevin Kra	mer	
			(Typed or printed name of person signing)	
		Secretary a	and Treasurer	
			(Title of person signing)	