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## COVER LETTER

TO: Amendment Section Division of Corporations

	etreat at Lexington Home		iation Inc. — —	
N17000000 DOCUMENT NUMBER:	8124 			
The enclosed Articles of Amendment an	nd fee are submitted for filin	ıg.		
Please return all correspondence concern	ning this matter to the follow	ving:		
Douglas J. Weiland				
		ntact Person)		
	(Firm/ C	ompany)		
334 E. Lake Rd. #172				
	(Add	ress)	<u> </u>	
Palm Harbor, Ft. 34685				
	(City/ State a	nd Zip Code)	<del></del>	
admin@jesproperties.com				
E-mail addres	s: (to be used for future and	nual report notifica	tion)	
For further information concerning this n	natter, please call:			
Douglas J. Weiland		727 at		
(Name of Co	ontact Person)	(Area Cod	e) (Daytime Telephone Number)	
Enclosed is a check for the following ame	ount made payable to the F	lorida Department	of State:	
	Filing Fee & D\$43.75 Filing to of Status Certified C (Additional enclosed)	opy Co copy is Co (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is oclosed)	
Mailing Address		Street Addres		
Amendment Section		Amendment S		
Division of Corporation P.O. Box 6327	115	Division of Co Clifton Buildi	·	
Tallahassee, FL 32314			re Center Circle	

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

of

The Retreat at Lexington Home Owners' Associa-	tion Inc.	
(Name of Corporation as o N17000008124	currently filed with the	Florida Dept. of State)
(Document	Number of Corporation (	(if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida No.	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration;	
Willow Bend Home Owners Association of Manate	ee County Inc.	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpor	ated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADD)</u>		
	-	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	N/A	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	d office address in Flori	da, enter the name of the
N/A Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		(Florida street address)
N/A	\	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	tered Agent:	
hereby accept the appointment as registered agent. 1	am familiar with and acc	ept the obligations of the position.
<i>M</i> .	// A	
	Signature of New Re	gistered Agent, if changing
	Page 1 of 4	2018 SEP 19

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A 	 
Add			
Remove			
2) Change		N/A	 
Add			
Remove			-1
3) Change		_	 
Add			
Remove			
4) Change		<del>.</del>	 
Add			-
Remove			
5) Change		<del>-</del>	 
Add			*
Remove			
6) Change			 
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)
N/A	
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	· <del></del>
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<u>-</u>	<del></del>
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The date of each amendment(s) adoption date this document was signed.	n;	, if other than the
Effective date <u>if applicable</u> :	- <del></del>	·
	(no more than 90 days after amendment file date,	)
Note: If the date inserted in this block document's effective date on the Departme	es not meet the applicable statutory filing requiren ant of State's records.	nents, this date will not be listed as the
Adaption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for	the amendment(s)
There are no members or members en adopted by the board of directors.	uitled to vote on the amendment(s). The amendment	ent(s) was/were
Dated	17-380	
Signature		
have not been sele	exice chairman of the board, president or other of cted, by an incorporator – if in the hands of a rece ted fiduciary by that fiduciary)	ficer-if directors liver, trustee, or
	DUNAS J. WELLAND Oryped or printed name of person signing	<del>(</del> )
···	President - Sole men	ber chairman
	(Title of person signing)	Board