## 1000008674

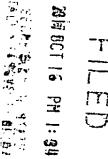
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## COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

AMPELOS HOM NAME OF CORPORATION:	MEOWNERS ASSOCI	IATION, INC.		
N17000008674 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
DIANE V KUENZEL, ESQ.				
	(Name of Contact	Person)		
KUENZEL LAW, P.A.				
	(Firmv Compa	my)		
4111 LAND O LAKES BLVD., SUITE 302-C				
	(Address)			
LAND O LAKES, FL 34639				
	(City/ State and Zi	p Code)		
ATHENAPOLITIS@GMAIL.COM				
E-mail address: (to be u	ised for future annual i	report notification	1)	
For further information concerning this matter, plea	ase cail:			
DIANE V. KUENZEL		813	996-7710	
(Name of Contact Per		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florid	a Department of :	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	& D\$43.75 Filing Four Certified Copy (Additional copy enclosed)	Certifi y is — Certifi	O Filing Fee leate of Status ied Copy tional Copy is (sed)	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

AMPELOS HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N17000008674 (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: AMPELOS VILLAGE HOMEOWNERS ASSOCIATION, INC. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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: (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

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>Mil</u>	n Doe ce Jones ly Smith	
Type of Action (Check One)	Title	<u> Харьс</u>	Address
1) Change	P	PETER POLITIS	4842 MITCHELL ROAD
Add			LAND O LAKES, FL 34639
X Remove			
2) Change	l,	PETROS POLITIS	4842 MITCHELL ROAD
X Add			LAND O LAKES, FL 34639
Remove			
3 ) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			··
6) Change			
Add		···	
Remove			

attach additional sheets, j	if necessary)	(Be specific)				
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	e date of each ame e this document was	ndment(s) adoption: 1-000057 16 KO11	, if other than the
Eff	ective 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 ate on the Department of State's records.	be listed as the
Ad	option of Amendm	ient(s) (CHECK ONE)	
	The amendment(s was were sufficient	) was/were adopted by the members and the number of votes cast for the amendment(s) int for approval.	
	There are no men adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were paid of directors.	
	Dated	OCTOBER 10, 2017	
		. -	<del></del>
		(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)	
		PETROS POLITIS	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	