

N18000001963

(Requestor's Name)

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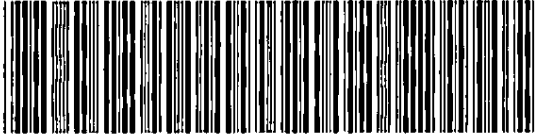
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OCT 22 2020

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DATE: 10/15/20

NAME: HALLMARK TOWNHOME OWNERS ASSOCIATION, INC

TYPE OF FILING: AMENDMENT

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

aHodge



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2020

FLORIDA FILING

SUBJECT: HALLMARK TOWNHOME OWNERS ASSOCIATION, INC.
Ref. Number: N18000001963

We have received your document for HALLMARK TOWNHOME OWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

PLEASE LIST TITLE FOR THE LAST MEMBER LISTED IN THE FILING.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 620A00020968

Please keep original file date
Thank you!

2020 OCT 28 PM 1:52
C.F.D.

Articles of Amendment
to
Articles of Incorporation
of

HALLMARK TOWNHOME OWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N18000001963

(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:

_____ *The new 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:

(City)

Florida

(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

2020 OCT 15 AM 9 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Eddie Rivers</u>	<u>2450 Highway 29 S. Ste. 1</u> <u>Cantonment, FL 32533</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Wes Malone</u>	<u>2450 Highway 29 S. Ste. 1</u> <u>Cantonment, FL 32533</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Lisa Strickland</u>	<u>25366 Proffitt Drive</u> <u>Daphne, AL 36526</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Dina Brown</u>	<u>17745 Ashley Drive</u> <u>Panama City Beach, FL 32413</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Aaron Chatraw</u>	<u>5716 Highland Lake Dr.</u> <u>Hilton, FL 32583</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Rachel McMenimen</u>	<u>251 SE St.</u> <u>Pensacola, FL 32502</u>

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

7) Add - Secretary, Ronald Hedrick, 198 Ballard Road, Vilonia, AR 72173

8) Add - Treasurer, David Bibee, 5004 Wyoming Ave, Nashville, TN 37209

9) Add - Thomas Sharron, 303 S E St, Pensacola, FL 32502


Director

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

10/14/2020

Signature


(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)

Kerry Anne Schultz

(Typed or printed name of person signing)

(Title of person signing)