## N 18 00000 2019

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Amend

JAN 1 0 2020 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

	·		
NAME OF CORPORATION: PAlage at	Serenoa	Homeowners	Associati
114 C.	002019		
DOCUMENT NUMBER: N18000	<u> </u>		
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
MARY Moulton			
ĺ	(Name of Contact Perso	on)	
Mary Moulton Forestar	(Firm/ Company)		
	(Firm/ Company)		
12620 Telecom D	rive		
TAMPA FL 33637	(City/ State and Zip Co	de)	
MARY Moulton @ f	OFESTAL.	Com t notification)	
For further information concerning this matter, please	call:		
MARY Moulton (Name of Contact Person	at	813-517-0	175
(Name of Contact Persor	n) ( <i>E</i>	Area Code) (Daytime Telephor	ne Number)
Enclosed is a check for the following amount made p	ayable to the Florida Dep	partment of State:	
S\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address  Amendment Section		t Address adment Section	
Division of Corporations		ion of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		on Building Executive Center Circle	
1 aliana58CU, FL 32314	2001	GACCIONE CEIRCI CHER	

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

PALMS AT SERENOA HOMEOWNERS ASSOCIATION, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) N18000002019 (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," 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: , Florida (Zip Code) (Cirv) 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	PT John V Mike SV Sally	Jones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>νρ</u>	Ray Demby	215 Celebration Place 115 Celebration, FL 34 747
2) Change Add	<u>(</u> )	Chris Tyree	215 Celebration Place 115
Remove 3) Change Add Remove	ρ	MARY I. Moulton	Celebration FL 34747 12620 Telecom Dr. Tampa, FL 33637
4) Change Add	<u>ST</u>	Julie Aragona	834 Highland Ave. Orland of FL 32801
Remove 5) Change Add Remove	<u> </u>	Melissa Dotson	6200 Lee Vista Blue, Suite 400 Orland FL 32822
6) Change Add			

If amending or adding additional Articatach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) add	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days afier amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will nartment of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated 11/1	٩	
Signature	y E Mollow Presisent	<del></del>
have not been	nan or vice charman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
<u>Ma</u>	(Typed or printed name of person signing)	
Pre	(Title of person signing)	
	(Title of person signing)	