

## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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(((H180001634943)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

R. WHITE

MAY 3 0 2018

From:

Account Name : BROAD AND CASSEL (BOCA RATON)

Account Number : 076376001555 Phone : (561) 483-7000 Fax Number : (561)483-7321

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

BrianBlythe@forestargroup.com Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE LANDING COMMUNITY ASSOCIATION, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	Association, Inc.
DOCUMENT NUMBER: N18000002948	
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Brian Blythe	
(Na	me of Contact Person)
Forestar (USA) Real Estate Group, Inc.	
	(Firm/ Company)
3330 Cumberland Blvd., Ste. 275	
	(Address)
Atlanta, GA 30339	
(Ci	ty/ State and Zip Code)
BrianBlythe@forestargroup.com	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call	:
Brian Blythe	al
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
(	S43.75 Filing Fee & S25.50 Filing Fee Certified Copy Certificate of Status Additional copy is enclosed) (Additional Copy is Enclosed)
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

Broad and Cassel 5/29/2018 3:34:07 PM

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18 MAY 29 AH 7: 59

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SECRETARY OF STATES TALL AHASSIE FLORIDA

Articles of Amendment Articles of Incorporation

The Landing Community Association, Inc. (Name of Corporation	as accountly filed wi	th the Florida Dunt at	( Stor=)
N1800002948	us currently luck wi	n the Profits Dept. 6.	( <u>.2040</u> )
	nent Number of Corpo	ration (if known)	
·	,	,	annaine adopte the following
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	nda Statutes, this <i>eter</i>	aa Not For Proja Cor	porunon adopts the tollowing
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word "Conpagy" or "Co." may not be used in the nam	d "corporation" or "ir <u>¢</u> .	corporated" or the abi	breviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST RE A STREET A	ible: IDDRESS )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )		<u> </u>
	<del></del>		
			<del></del>
D. If amending the registered agent and/or regi	stered office address	in Florida, enter the n	ame of the
new registered agent and/or the new register	Corporation Services	Company	
Name of New Registered Agent:	Corporation dervices		
	1201 Hays Street		
New Registered Office Address	:	(Florida street on	ktress)
	Tallahassee		32301
	(City)		, Florida (Zip Code)
at the state of the state of the state of	Danistaansk kaants		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ages	nt. I am familier with	and accept the obligati	ons of the position.
		1	
·			
	Signature of	New Registered Agent.	
	•	Brian Courtne	Эγ
		Asst. V. Pres	· .

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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 = Chairmon 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	<u> </u>	John Poe	
X Remove	$\Sigma$	Mike Jones	
_X Add	<u>5∨</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change	PD	Carlos de la Ossa	12602 Telecom Drivo
Add	•	<del>-</del>	Tampa, FL 33637
X Remove			
2) Change	TSD	Bob Freeman	3330 Cumberland Blvd., Ste. 275
Add			Atlanta, GA 30339
X Remove 3)Change	VPD	John E. Snyder	12602 Telecom Drive
Add			Tampa, FL 33637
Remove			
4) Change	PD	Frank Covelli	3330 Cumberland Blvd., Ste. 275
Add			Atlanta, GA 30339
Remove			
5) X Change	TSD	Ryan Harvey	3330 Cumberland Blvd., Ste. 275
Add			Atlanta, GA 30339
Remove			
6) Change			
Add			
Remove			

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(attach additional sheets, if necessar)	y). (Be specific)			
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illanta, GA 30339				
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The	date of each amend	ment(s) adoption:	, if other than the
	this document was s		
Effe	ective date <u>if applica</u>		
		(no more than 90 days after amendment file date)	
Not doc	e: If the date inserted ument's effective date	f in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	e listed as the
Ade	ption of Amendmet	u(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were sufficient	was, were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
	Dated	5/21/18	
	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)	
		Frank Covelli	
		(Typed or printed name of person signing)	
		Director/President	
		(Title of person signing)	