## N19 000001692

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## **COYER LETTER**

TO: Amendment Section Division of Corporations

Aberdeen Con	nmunity Association	l, Inc.	
N19000001692			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	re submitted for filir	ng.	
Please return all correspondence concerning thi	s matter to the follo	wing:	
Tri Morocco			
	(Name of Co	ntact Person)	
Melrose & Partner			
<del></del>	(Firm/ C	ompany)	
3527 Palm Harbor Boulevard			
	(Add	lress)	
Palm Harbor, FL 34683			
	(City/ State a	nd Zip Code)	
tri@melrosepartner.com			
E-mail address: (to b	oe used for future an	nual report notification	on)
For further information concerning this matter,	please call:		
Tri Morocco		813 at	918-1366
(Name of Contact )	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the I	Florida Department o	f State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S		copy Certi l copy is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address		Street Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

FILED

Aberdeen Community Association, Inc.

2020 OCT 19 PH 4: 45

(Name of Corporation as currently filed with the Florid	a Dept. of State)	SECRETARY OF STATE TALL MHASSEELEL
N19000001692		17.E0.7417 76.E014 E
(Document Nur	nber of Corporation	(if known)
Pursuant to the provisions of section 617,1006. Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida N</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpo	rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	<del></del>	
D. If amending the registered agent and/or registered o	ffice address in Flo	orida, enter the name of the
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		,
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and a	ccept the obligations of the position.
	Signature of New I	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 Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	P	Michael Lawrence	3527 Palm Harbor Blvd Palm Harbor, FL 34683
x Remove			
2) <u>*</u> Change Add	<u>P</u>	Rvan Zook	3527 Palm Harbor Blvd Palm Harbor, FL 34683
X	<u>ST</u>	Joe Burgess, IV	3527 Palm Harbor Blvd Palm Harbor, FL 34683
4) Change × Add	VPS	John Snyder	3527 Palm Harbor Blvd Palm Harbor, FL 34683
Remove			
5) Change Add	<u>T</u>	Anne Mize	3527 Palm Harbor Blvd Palm Harbor, FL 34683
Remove			<del></del>
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

		<del></del>
	<u> </u>	<del></del>
		<del>- · · ·</del>
		<del></del>
		<del></del>
		<del></del>
The date of each amendment(s) adoption: _ date this document was signed.		_, if other than the
Effective date if applicable:		
(no.	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date will not be of State's records.	be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

Dated	10-2-2020
Dated	
Signature	. 1341/
·	(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)
	Ryan Zook
	(Typed or printed name of person signing)
	President

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

. .