N19000 005 454

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Nona Village Center NAME OF CORPORATION:	Property Owners Associations, Inc.
N19000005454	·
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
John Reich	
	(Name of Contact Person)
Nona Village Center, LLC	
	(Firm/ Company)
10783 Narcoossee Road, Suite 117	
	(Address)
Orlando, Fl. 32832	
	(City/ State and Zip Code)
john@reichproperties.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
John C Reich	407 847-4888
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Nona Village Center Property Owners Association	i, Inc.			
Name of Corporation as currently filed with the	Florida 1	Dept. of State)		
N19000005454				
(Docum	nent Numb	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006. Flor amendment(s) to its Articles of Incorporation:			orporation adopts the	following
A. If amending name, enter the new name of the	<u>corporat</u>	ion:		
name must be distinguishable and contain the word		tion" or "incorporated" or the c	abbreviation "Corp." c	_The new 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)		10783 Narcoossee Road, Suite	: 117	
		Orlando, FL 32832	ഗ	2
			TALESCRE	30 6.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10783 Narcoossee Road, Suite	:117 AHX	6-3 <u>3</u>
<u> </u>		Orlando, FL 32832	Z S S S S S S S S S S S S S S S S S S S	P
			STA PAR	জ ্
D. If amending the registered agent and/or regis			e name of the	8
new registered agent and/or the new register	ed office a	address:		
Name of New Registered Agent:	10783 No	arcoosee Road, Suite 117		
-		(Florida street	addressi	
New Registered Office Address:				
	Orlando		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered u. Lam fa	Agent: miliar with and accept the obliga	ations of the position.	
_	Si	ignature of New Registered Ager	it, 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Remove X Add	<u>SV</u> <u>Sall</u>	<u>xe Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	VDAS	Michael C. Pappas	6900 Tavistock Lakes Blvd. Suite 200
X Remove 2) Change	VDAS	Howard Long	Orlando, FL 32827 6900 Tavistock Lakes Blvd.
X Add			Suite 200
Remove			Orlando, FL 32827 FR 28 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
4) Change Add			-
Remove 5) Change Add			H12: 52
Remove			
6) Change Add		<u></u>	
Remove E. If amending or ac (attach additional s		Page 2 of 4 Articles, enter change(s) here: vi. (Be specific)	
			<u>. </u>

was/were sufficient for approval.

Dated	December 05, 2019
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) John Reich
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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

adopted by the board of directors.

SECRETARY OF STATE
TALLAHASSEE, FL

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