

N19000011361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

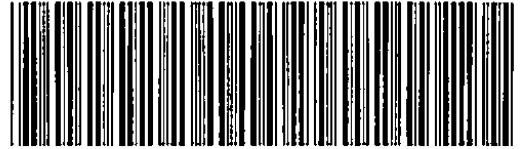
(Document Number)

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JAMES MANCUSO, P. A.

615 FOX HUNT CIRCLE
LONGWOOD, FLORIDA 32750

TELEPHONE: 407-804-2500

FACSIMILE: 407-804-2504

206-1-2

May 19, 2020

Department of State
Division of Corporations
Attn: Amendment Filing Section
2415 N Monroe St., Suite 810
Tallahassee, FL 32303

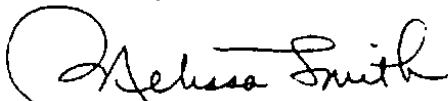
RE: Auburndale Manor Homeowners Association, Inc.
Document No. N19000011361
Letter No. 520A00009753

Dear Sir or Madam:

Enclosed are the corrected Articles of Amendment (in duplicate) for the above referenced corporation. You have previously received our payment of \$43.75 for the filing fee and cost for a certificate of status.

Please file the Articles of Amendment and return the proof of filing with certificate of status to my attention. A pre-paid return envelope is enclosed for your convenience. Please contact me with any questions.

Sincerely,



Melissa Smith
Florida Registered Paralegal
FRP 263098

Enclosures

Articles of Amendment
to
Articles of Incorporation
of

2011

Auburndale Manor Homeowners Association, Inc.

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

N19000011361

(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:

Brookwood at Auburndale Manor Homeowners Association, Inc.

TI

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

6200 Lee Vista Blvd., Suite 400

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32822

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6200 Lee Vista Blvd., Suite 400

Orlando, FL 32822

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:

Melissa Dotson

6200 Lee Vista Blvd, Suite 400

(Florida street address)

New Registered Office Address:

Orlando

(City)

Florida 32822

(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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

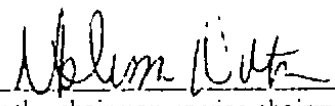
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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 November 7, 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)

Melissa Dotson
(Typed or printed name of person signing)

Director
(Title of person signing)