NIACCCC IIIISC

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

Office Use Only



300341698283

09/08/26--01093--018 **85.00

S TALL.FN'
MAR 2 5 2020

2020 MAR -9 PM 3: 40

Jun 1

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	The Cloisters Residence Wi	lents Association, Inc. th Chapter 617, F.S. (N	Not For Profit)	
DOCUMENT NUMBER: N				
The enclosed Articles of Amen		mitted for filing		
Please return all correspondence		_		
ricase return an correspondent	e concerning this mate	er to the tonowing.		
Daniel R. Vaughen				
		(Name of Contact Pe	rson)	
The Cloisters Residents Assoc	ciation, Inc.			
		(Firm/ Company)	
400 E. Howry Ave., Apt. 32				
400 E. Howly Mei, Apr. 32		(Address)		
Del and, FL 32724				
		(City/ State and Zip C	Code)	
dvaughen@gmail.com				
E-m	ail address: (to be used	for future annual rep	ort notification	n)
For further information concern	ning this matter, please	call:		
Daniel R. Vaughen			(386)	490-2216
	ame of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follower	owing amount made p	ayable to the Florida I	Department of 3	State:
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi s Certifi (Addit Enclo	Filing Fee cate of Status ed Copy is sed)
50 · · · · · · · · · · · · · · · · · · ·	i	G.,	4 4 1 3	

Mailing Address Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address
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

The Cloisters Residents Association, Inc.

(Name of Corporation as currently filed with the Flor N19000011486	rida Dept. of State)	
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))	2020 ; ;
		HAR -
D. If amending the registered agent and/or registered	d office address in Florida, antouthe name of the	9 PH
new registered agent and/or the new registered of		<u>"</u> ယူ
Name of New Registered Agent:		- Feb.
New Registered Office Address:	(Florida street address)	
Hew Registered Office Madress.		
	(City), Florid	a Code)
New Registered Agent's Signature, if changing Regis	tered Agent	
I hereby accept the appointment as registered agent. I to		position.
	Signature of New Registered Agent, if changing	gg

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)

(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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u>	Betty Lennon	400 E. Howry Ave., Apt 622 DeLand, FL 32724
X Remove			
2) Change Add		James Dunmire	400 E. Howry Ave., Apt 710 DeLand, FL 32724
X Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add	<u> </u>		
Remove			
6) Change Add			
Remove Page 2 of 4 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
ARTICLE VII is he			
The cornorate r		CLE VII - CORPORATE POWERS s corporation are as provided in	
			inchanged, in full force and effect

•		
		
		·
		
		
		
		•
		,
		
		· - · - · · · ·
	Page 3 of 4	
		16 a a a
The date of each amendment(s) adoption date this document was signed.	n:	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 do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	i by the members and the number of votes cast for the amendment(s)	

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 3/6/20
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)
(Typed or printed name of person signing)
President (Title of person signing)