## N200001827

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DATE:

10/8/20

NAME:

TIERRA DEL SOL EAST HOMEOWNERS ASSOCIATION INC

TYPE OF FILING: AMENDMENT

COST:

43.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	TIERRA DEL SOL	EAST HOMEOW	NERS ASS	OCIATION, IN	C.
1	N20000001827				
DOCUMENT NUMBER: _			<del> ,-</del> .		
The enclosed Articles of Ame	endment and fee are sub-	mitted for filing.			
Please return all corresponder	nce concerning this matt	er to the following:			
Sharon K. Gray					
		(Name of Contact F	erson)		
Triad Professional Service	S				
		(Firm/ Compar	ıy)		
1720 Windward Concourse	e, Ste. 390				
		(Address)			
Alpharetta, GA 30005					_
		(City/ State and Zip	Code)		
jbaden@triadpros.com					
E-	mail address: (to be used	for future annual re	port notifica	ation)	
For further information conce	rning this matter, please	call:			
Sharon K. Gray		а	770	777-2091	
(	Name of Contact Person			de) (Daytime T	elephone Number)
Enclosed is a check for the fo	llowing amount made pa	ayable to the Florida	Department	t of State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Co	52.50 Filing Fee entificate of Statuertified Copy additional Copy inclosed)	

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 of

10 -0 91 **3:** 52 TIERRA DEL SOL EAST HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N20000001827 (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: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." 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) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: , Florida (Zip Code) (City) 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

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	VPD	MARIA PEREZ	2600 LAKE LUCIEN DR., STE. 350 MAITLAND, FL 32751			
Remove						
2) Change Add	<u>VPD</u>	MATTHEW CUARTA	2600 LAKE LUCIEN DR., STE. 350 MAITLAND, FL 32751			
XXX   Remove		<del></del>				
4) Change Add	<del></del>					
Remove  5) Change    Add    Remove						
6) Change Add	<u></u>					
E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)						
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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 meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.				
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 _	10/07/2020				
h	(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)				
	NORA SCHUSTER				
	(Typed or printed name of person signing)				
	PRESIDENT				
	(Title of person signing)				

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