N21000000945

| (Requestor's Name) | | | |
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| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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2022 SEP 26 PH 4: 2

MICHAEL G. HORTON, P.A.

3721 So. HIGHWAY 27, SUITE A CLERMONT, FL 34711 352-394-4008 FAX No. 352-394-5805 www.MGHPA.com Janice@MGHPA.com

September 13, 2022

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Bella Terra HOA, Inc.

Enclosed please find our check in the amount of \$35.00, representing payment for the filing of the Articles of Amendment to Articles of Incorporation of Bella Terra HOA, Inc.

If there are any questions, please contact me.

Thạnk you.

Janice Pietrowicz Legal Assistant

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | DA, INC. | | |
|--|--|---|--|
| N21000000995 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: | | |
| MICHAEL G. HORTON, ESQUIRE | | | |
| | (Name of Contact Po | erson) | |
| MICHAEL G. HORTON, P.A. | | | |
| · | (Firm/ Company | <i>c</i>) | |
| 3721 SO. HIGHWAY 27, SUITE A | | | |
| | (Address) | | |
| CLERMONT, FL 34711 | | | |
| | (City/ State and Zip | Code) | |
| JANICE@MGHPA.COM | | | |
| E-mail address: (to be used | d for future annual rep | port notification | n) |
| For further information concerning this matter, please | e cail: | | |
| MICHAEL G. HORTON or JANICE PIETROWICZ | | 352 | 394-4008 |
| (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 Certified Copy (Additional copy i enclosed) | Certif s Certif | 0 Filing Fee icate of Status ied Copy tional Copy is osed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | An Di Th | reet Address nendment Sect vision of Corpo te Centre of T 15 N. Monro | orations |

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2022 SEP 26 PM 4: 25

| BELLA TERRA HOA, INC. | |
|---|--|
| (Name of Corporation as currently filed with the Florida I | Dept. of State) |
| N21000000995 | |
| (Document Numb | per of Corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation: | |
| A. If amending name, enter the new name of the corporat | tion: |
| name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name. | The |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS | 2864 MAJESTIC ISLE DR. |
| | CLERMONT, FL 34711 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 17305 CEDAR AVENUE SOUTH |
| | SUITE 200 |
| | LAKEVILLE, MN 55044 |
| D. If amending the registered agent and/or registered office and/or the new registered office and the new registered | |
| Name of New Registered Agent: | |
| New Registered Office Address: | (Florida street address) |
| | , Florida |
| | (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa | |
| <u></u> | 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 | oncs . | |
|--|--|--|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) × Change Add Remove | PRES | KEVIN RAMIREZ | 220 E HORNBEAM DR. LONGWOOD, FL 32779 |
| 2) Change Add | PRES | JIM ATKINSON | 2864 MAJESTIC ISLE DR. CLERMONT, FL 34711 |
| Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove 5)ChangeAdd | | • | |
| Remove Change Add | | | |
| E. If amending or addin (attach additional shee | g additional Arti | cles, enter change(s) here: (Be specific) | |
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| The date of each amendment | t(s) adoption: August 15, 2022 | | | , if other than t |
| date this document was signed | | | | |
| Effective date <u>if applicable</u> : | August 15, 2022 | | 7-8- | |
| | (no more than 90 days | after amendment | file date) | |
| Note: If the date inserted in the | as block does not meet the application because the Department of State's records. | le statutory filing | g requirements, this d | ate will not be listed as the |

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

(CHECK ONE)

Adoption of Amendment(s)

| There are no men adopted by the bo | obers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors. | | |
|------------------------------------|--|------|-----------------------|
| Dated | Augsut 15, 2022 | | |
| 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) | | |
| | JIM ATKINSON | | |
| | (Typed or printed name of person signing) | | |
| | PRESIDENT | e: 1 | |
| | (Title of person signing) | · · | MILL SEP CO LEI 4. CO |

2027 SEP 26 PM 4: 25