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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations		,	•
JACKSON LANDIN NAME OF CORPORATION:	IG HOMEOWNERS	ASSOCIATIO	ON, INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
SHANNON GOSNELL			
	(Name of Contact Po	erson)	
BY THE BOOK PROFESSIONAL ACCOUNTING,	LLC		
	(Firm/ Company	7)	
900 EAGLE POND DRIVE			
17.1	(Address)		
WINTER HAVEN, FL 33884			
	(City/ State and Zip	Code)	
bythebookaccting@gmail.com			
E-mail address: (to be used	for future annual rep	ort notification	n)
For further information concerning this matter, please	call:		
SHANNON GOSNELL	at	863	213-5556
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable 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)	Certifi s Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		reet Address	
Amendment Section Division of Corporations		nendment Secti vision of Corpe	
P.O. Box 6327		e Centre of T	
Tallahassee, FL 32314			e Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
(Document Numb	er of Corporation (if know)	n)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pr	ofit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion: N/A	
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or	The new the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	900 EAGLE POND DRIV	VE
(Principal office address <u>MUST BE A STREET ADDRESS</u>	WINTER HAVEN, FL 33	3884
		<u>.</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	900 EAGLE POND DRI	ve
	WINTER HAVEN, FL 3.	3884
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		er the name of the
	uuress. 14/PA	
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 fair		obligations of the position.
	unature of New Registered	Avent 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 Doc 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	ones .	
Type of Action (Check One)	_Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	BROEDEL, WAYNE	3999 W FIRST STREET SANFORD, FL 32771
* Remove			
2) Change Add	D	PRIOR, P. THOMAS	3999 W FIRST STREET SANFORD, FL 32771
* Remove 3) Change Add * Remove	D	PRINCE, IAN	200 S. F STREET HAINES CITY, FL 33844
4) Change Add	<u>PD</u>	KARTMAN, DONNA	900 EAGLE POND DRIVE WINTER HAVEN, FL 33884
Remove			
5) Change * Add	VD	BEAL, CINDY	900 EAGLE POND DRIVE WINTER HAVEN, FL 33884
Remove			
6) Change Add	STD _	DAWSEY, DERRICK	900 EAGLE POND DRIVE WINTER HAVEN, FL 33884
Remove			
E. If amending or addin (attach additional shee	ig additional Arti	cles, enter change(s) here: N/A	
	·		-

• • • • • • •		
		· · ·
The date of each amendment(s) adoption:date this document was signed.	12 5 2023	, if other than the
The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: 17 5 2 0 (no more the	13 han 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable statutory filing requiremen	

Adoption of Amendment(s)

(<u>CHECK ONE</u>)

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

Dated	12/8/2023
Dateu	
Signature	Jona Kartman
_	(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)
	Dona Kartman
	(Typed or printed name of person signing)