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A. RAMSEY MAR #8. 2024

COVER LETTER

Division of Corporations Lowery Estates Homeowners' Association, Inc. N22000002297 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) 14408 N Florida Ave (Address) Casalent 23 @ gma, 1. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: **※** \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Conv (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327

TO: Amendment Section

Tallahassee, FL 32314

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

FILED

Lowery Estates Hor	menumens' A	-SSOCIATION Inc PM12 22
(Name of Corporation as currently filed with the F N2200002297		SER CHARY OF STATE OL SHASSEF, FLORIDA
(Documen	t Number of Corporation	(if known)
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida N</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
Lowery Gardens Esta- name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	tes Homeowner corporation" or "incorporation"	S' Association, Int. The new trated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u> </u>	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		orida, enter the name of the
Name of New Registered Agent:		
<u>New Registered Office Address</u> :		(Florida street address)
_		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Res I hereby accept the appointment as registered agent.		eccept the obligations of the position.
	Signature of New 1	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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
		onal Articles, enter change(s) here: ssary). (Be specific)	
-			
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The date of each amendment(s) adoption date this document was signed.	:	_, if other than the
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)	
(1	no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted to was/were sufficient for approval.	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 $\frac{2/20/2024}{}$
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)
Tessica Casal (Typed or printed name of person signing)
(Title of person signing)