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-	To: From:	Division of Corporations Fax Number : (850)617-6380		FILE MEDIE 1435EE
		Account Name : FRANK, WEINBERG, BLAG Account Number : I20040000083 Phone : (954)474-8000 Fax Number : (954)474-9850	СК, Р.Ц.	PH 1: 23
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July 20, 2022

FLORIDA DEPARTMENT OF STATE

OCALA CROSSINGS SOUTH HOMEOWNERS ASSOCIATION, INC. 2500 WESTON RD STE 311 WESTON, FL 33331US

SUBJECT: OCALA CROSSINGS SOUTH HOMEOWNERS ASSOCIATION, INC. REF: N22000003074

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check only ONE box under adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey OPS

FAX Aud. #: H22000243B26 Letter Number: 822A00016170

P.O BOX 6327 - Tailahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

Ocaia Crossings South Homeowners Association, Inc.

(Name of Corporation as currently filed with the Floride Dent. of State)

N22000003074

(Document Number of Corporation (If known)

Persuant to the provisions of section 617.1006, Florida Statutes, this Plorida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, must the new name of the corporation:

mame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" at "Co." may not be used in the name.

B. Enter new principal affice address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

C. Enter new insigns ackiness, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		r 2202 1	
			۰! میں
D. If anending the registered agent and/or registered office address in Florida, enter the name of the new registered office address;	1.112		ĩ
Name of New Registered Agent:		<u> </u>	-
		23	
New Replainend Office Address:			
Fiorida			

(Cio)

New Registered Agent's Signature, if chaoping 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

(Dp Code)

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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: (Attoch additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

Example:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeheld. 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.

X.Change X.Remove X. Add	<u> Ү Між</u>	o Doge c Togges y Snith					
Dans of <u>Action</u> (Check One)	Thie	Name	Address				
l) Change Add							
2) Remove 2) Change Add							
Add							
4)Change Add	——						
J Remove							
δ) Change Λόδ		<u> </u>					
Remove E. If amending or additional Articles, onise change(s) here: (which additional sheets, if necessary). (Be spec(fic)							
		Articlo V Section 16 as follows:					
To install, maintain, repair	r and replace the i	light poles and other common area lighting. Th	e Association is authorized to				
		such lighting without the vace from the Owner					
	cleant of any of	linie or successor of the Declarent, and the ob	ligation to repay such loss shall				
or a common expanse.	· · · · · · · · · · · · · · · · · · ·	······································					

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The date of each amendment(s) ad date this document was signed.	loption:			, if other than the
Effective date if applicable:				
		90 days after amendme.		<u> </u>
<u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	ck does not meet the a partment of State's rea	applicable statutory fili cords.	ng requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ON</u>			
The amendment(s) was/were ad was/were sufficient for approva.	opted by the member	s and the number of vo	tes cast for the amendment	nt(s)

· :

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were ы adopted by the board of directors.

Dated Signaturo

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if is the hands of a receiver, trustee, or other court appointed Educiary by that (iduciary)

Stoven Fischer

(Typed or printed name of person signing)

President

(Title of person signing)

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