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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Bentley North Homeowners Ass	ociation Inc			. <u> </u>
N23000004651 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for fil	ing.			
Please return all correspondence concerning this matter to the foll	owing:			
Denise Abererombie				
(Name of C	ontact Person)			
Highland Community Management LLC				
(Firm/	Company)			
4110 S. Florida Ave., Suite 200				
(Ac	ldress)	<u>-</u>		
Lakeland, FL 33813				1 م د
(City/ State	and Zip Code)			r:
d.abercrombie@hcmanagement.org				~_
E-mail address: (to be used for future a	nnual report not	ification)	=======================================
For further information concerning this matter, please call:				į.
Denise Abercrombie	863		940-2863	ū
(Name of Contact Person)	at (Area	Code)	(Daytime Telephone Nu	ımber)
Enclosed is a check for the following amount made payable to the	Florida Departr	nent of S	state:	
S43.75 Filing Fee & Certificate of Status Certified (Addition enclosed)	Copy al copy is	Certific Certific	Filing Fee cate of Status ed Copy onal Copy is sed)	

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

Bentley	North	Homeowners	Δ	ssociation	Inc
201111111	. 101111	Tromcovincia		133041011	1110

(Name of Corporation as currently filed with th	e Florida I	Dept. of State)		
N23000004651				
(Dосш	nent Numb	er of Corporation (if known)	 .	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	es, this Florida Not For Profit Corp	poration adopts the follow	wing
A. If amending name, enter the new name of th	e corporat	ion:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated" or the abbi	The reviation "Corp." or "In	
B. Enter new principal office address, if applica	able:	4110 S Florida Ave, Suite 200		
(Principal office address <u>MUST BE A STREET ADDRESS</u>		Lakeland, FL 33813		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	4110 S. Florida Ave Suite 200 Lakeland, FL 33813		
D. If amending the registered agent and/or reginew registered agent and/or the new register			ume of the	
Name of New Registered Agent:		Community Management LLC		F. J.
	4110 S. F	lorida Ave., Suite 200		صآت
New Registered Office Address:	:	(Florida street add)	ress)	
	Lakeland	(City)	, Florida 33813 (Zip Code)	
New Registered Agent's Signature, if changing land in the language of the appointment as registered agent in the language of the appointment as registered agent in the language of the langua	it. Lam fai	Agent:	ns of the position.	

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>Pres</u>	D. Joel Adams	4110 S. Florida Ave., Suite 200 Lakeland, Fl. 33813
Remove			
2) Change Add	<u>VP</u>	Brian Walsh	4110 S. Florida Ave., Suite 200 Lakeland, FL 33813
Remove 3)	<u>S/T</u>	Milton Andrade	4110 S. Florida Ave., Suite 200 Lakeland, FL 33813
4) Change Add	<u>P/T</u>	Danny Saddler	2723 Thornhill Road Auburndale, FL 33823
× Remove			D-
5) Change Add	VP/S	Cara Saddler	2723 Thornhill Road Control Auburndale, FL 33823
x Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	<u> </u>
	<u> </u>	11 8	
			

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			<u>.</u>
The date of each amendment(s) adoption date this document was signed.	tion:		, if other than the
Effective date if applicable:	(no more than 90 days after amen		
	(no more than 90 days after amen	dment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutor, tment of State's records.	y filing requirements, this date will r	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of	of votes cast for the amendment(s)	

	11-30-23
Dated	
Signature	
I	(By the chargean 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 pourt appointed fiduciary by that fiduciary)
/	D. Joel Adams
\mathcal{L}	(Typed or printed name of person signing)

(Title of person signing)