NQLOO	2002595
(Requestor's Name) (Address) (Address)	300436446473 03/16/2401019003 **35.00
(City/State/Zip/Phone #)	
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COVER LETTER

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TO: Amendment Section Division of Corporations	
THE GROVE HOMEO NAME OF CORPORATION:	WNER'S ASSOCIATION OF OAKLAND, INC.
N24000002595 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submit	ied for filing.
Please return all correspondence concerning this matter t	o the following:
FRANCO SCALA	
(N	ame of Contact Person)
NEW HORIZONS INVESTMENTS	
	(Firm/ Company)
1010 VINELAND RD	
	(Address)
WINTER GARDEN, FL 34787	
(C	ity/ State and Zip Code)
INFO@PIONEERBUILDERSFL.COM	
E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, please ca	11:
DEBBIE RODRIGUEZ	407 593-5148
(Name of Contact Person)	atat
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:
Certificate of Status (\$43.75 Filing Fee &□\$52.50 Filing FeeCertified CopyCertificate of Status(Additional copy is enclosed)Certified Copy(Additional Copy is Enclosed)Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address</u> 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

THE GROVE HOMEOWNER'S ASSOCIATION OF OAKLAND, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N24000002595

:

(Document Number of Corporation (if known)

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

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

THE GROVE AT THE HARVEST DISTRICT HOME	OWNERS ASSOCI	ATION, INC.	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "inco	rporated" or the abbreviation "Corp.	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	N/A <u>RESS</u>)		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) <u>N/A</u>		
			2024 SEI
D. If amending the registered agent and/or registere	d office address in	Florida, enter the name of the	P 16
new registered agent and/or the new registered o	ffice address:		
Name of New Registered Agent: NIA	L Contraction of the second seco	•	, <u>H</u>
		1	2:0
<u>New Registered Office Address</u> :		(Florida street address)	<u> </u>
		. Florida	
	(City)	(Zip Code)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.*

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)

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mik</u>	n Doe <u>e Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add	·		
3) Remove 3) Change Add Remove			
4) Change Add			
Remove 5/ Change Add			
6) Remove 6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

N/A

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	4- <u></u>	
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The date of each amondment(s) adont	ion:	if other than the
late this document was signed.	<u> </u>	
are this document was signed.		
iffective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	· · ·	
Note: If the date inserted in this block c	loes not meet the applicable statutory filing requirements, this da	te will not be listed as the
ocument's effective date on the Depart	ment of State's records.	
er and a server and an and bepart		
dometron of American American America	CHECK ONEN	
Adoption of Amendment(s)	(<u>CHECK ONE)</u>	

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

N/A

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

09.11.2 Dated Signature

(By the chairman of 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)

FRANCO SCALA

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(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)