N24429



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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: M34439 Eak Cash Howe Owner 175500
document number: M 29429
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Faith Daniels (Name of Contact Person)
Like Cassie Homeowher A-Ssocieton. (Firm/Company) Inc
1801 Banado Lovias DV. (Address)
(City/ State and Zip Code)
E-mail address: (to be used for fundre annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at S130 933-5897 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate Opy (Additional Copy is Enclosed)
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

(Name of Corporation as currently filed with the Florida Dept. of State)
M24429 Lake Cussile Homeowner Association, Inc
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: 1801 Benedo Lones Dy (Principal office address MUST BE A STREET ADDRESS) Tellance S See FL 33307
Tallaha S See, +1 3050 M
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
19
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: Faith Daniels
Name of New Registered Agent: Faith Daniels 75 5
(Florida street address)
New Registered Office Address:
Tauchasse Florida 3)317 (City) (Zip Code)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
darth Panlels
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)

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.

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Example: X Change X Remove X Add	PT John I. V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change Add	MV (P	Ros Burk	7944 Bernard St Tankonassa, #1 30317
Remove 2) Change Add	MYS (Y	Tittany Boone	1808 Benedo Lomas Pr. Trulinas Scipte 30317
Remove Change Add	1 <u>)) / j</u>) Amber Smith	Thurshaller, Fr 3)317
Remove 4) Change Add	1 <u>mys</u> (T) Faith Damels	1801 Donado Lomas Pr Tauranassa, Fr 30317
Remove 5) Change Add	<u>Mv.</u>	Tim Daxtar	7972 Banard St. Tanama Dente 32317
Remove 6) Change Add	MVS	Kenda Baxter (remove)	7970 Bernard St. Farlanasser, FT 3)317
	Iding additional Ar	Danh Pinson . ticles, enter change(s) here:	Tau chasse, ft 3)317
		ded are replacing	the current
HDH P.	ک در√ کے		
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Pleade	COUT	-or questions	trith
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The date of each amendment(s) adoption: 10/35/34 date this document was signed.	
Effective date if applicable: 10 05 21 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	

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

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
adopted by the board of directors.
Dated 16 25 24
Dated 6 25 24 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)
French Daniels
(Typed or printed name of person signing)
TVCG SWW + DA (Title of person signing)
(Title of person signing)