## N27144

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		wners Association, Inc.			
DOCUMENT NUMBER:	N27144			·	
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
John Vataha					
		(Name of Contact Perso	on)		
		(Firm/ Company)			
601 Willow Pond Lane					
		(Address)	- 1 - 11 1 - 11 11 11	·	
Osteen, FL 32764					
		(City/ State and Zip Coo	de)		
jvataha@gmail.com					
1	:-mail address: (to be use	d for future annual report	notification	1)	
For further information con	cerning this matter, please	e call:			10 No. 1
John Vataha		at	15	833-4692	7978 Ausi 22 TANI (
	(Name of Contact Person	ı) (A	irea Code)	(Daytime Teleph	ione Number)
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	partment of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	) Filing Fee icate of Status ied Copy tional Copy is used)	MI 10: 53
Mailing A	\ddress	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327 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

Indian Hammock Owners Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N27144 (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: NA 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. 601 Willow Pond Lane B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) Osteen, FL 32764 C. Enter new mailing address, if applicable: 601 Willow Pond Lane (Mailing address MAY BE A POST OFFICE BOX) Osteen, FL 32764 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: (Florida street address) New Registered Office Address: (City) 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.

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.

Example:  X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally So	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) × Change Add	<u>vu</u>	J. Scott Green	932 Indian Hammock Drive Osteen, FL 32764
Remove 2) Change Add	<u>VD</u>	Alan Birkenmever	800 Magnolia Lane Osteen, FL 32764
X Remove 3) Change Add X Remove	<u>S</u>	Cierra Jovner	964 Indian Hammock Drive Osteen, FL 32764
4) Change Add	<u>T</u>	David Massev	7251 Winding Lake Circle Oviedo, FL 32765
<ul> <li>X Remove</li> <li>5) Change</li> <li>X Add</li> </ul>	<u>ρ</u>	Jeffery Kidd, M.D.	'4565 Old Carriage Trial College FL 32765
Remove 6) Change × Add	<u>T</u>	John Vataha	601 Willow Pond Lane Osteen, FL
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	

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e date of each amendment(s) adoption: e this document was signed.	March 18, 2023					, if othe	r than tl
fective date <u>if applicable</u> :	o more than 90 days a				<u></u> .		
	o more than 90 days a	fier amendi	nent file date	)	·		

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 east 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.				
Aug Dated	ust 14, 2023			
(David	he chairman or vice chairman of the board, president or other officer-if directors enot been selected, by an incorporator – if in the hands of a receiver, trustee, or recourt appointed fiduciary by that fiduciary)			
Jo	ohn Scott Green			
_	(Typed or printed name of person signing)			
V	'ice President/Director			
_	(Title of person signing)			

563 KDr. 44 KD IU. 33