## N29933

(Re	questor's Na	ime)	
(Ad	dress)		
(Ad	dress)		
(Cit	ty/State/Zip/F	Phone #1	<del></del>
(Cil	iy/Qtate/Zip/r	none #)	
PICK-UP	☐ war	г	MAIL
(Bu	isiness Entity	/ Name)	
(Do	cument Nun	nber)	
Certified Copies	_ Certifi	cates of (	Status
Special Instructions to Filing Officer:			
1 Box	4135	408	

Office Use Only



600329207576

05/13/19--01018--016 ++35.00

19 JUH - 6 PH 3: 40

'JUN 0 6 2019

D CUSHING

## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Bryan Cave Estates I	Iome Owner's Assoc	iation			
N29933 DOCUMENT NUMBER:					_
The enclosed Articles of Amendment and fee are subr	nitted for filing.				
Please return all correspondence concerning this matte	er to the following:				
ELIA NADER					
	(Name of Contact Po	rson)			
	(Firm/ Company	)			
812 GEORGE HECKER DRIVE					
	(Address)			19	17.50 17.50
SOUTH DAYTONA, FL 32119				19 🔛	크
	(City/ State and Zip C	Code)		ည 1	30 A831
keurrey@cfl.rr.com	-ya ya			<u> </u>	£  }  }
E-mail address: (to be used	•	ort notification	1)		GWALIONS CWALIONS
For further information concerning this matter, please	call:				丟
Katherine Currey, CPA	at	386	428-4260		
(Name of Contact Person			(Daytime Telephone	Number)	
Enclosed is a check for the following amount made pa			State:		
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fiting Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee leate of Status led Copy lional Copy is sed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div	eet Address lendment Secti vision of Corpe fton Building			

2661 Executive Center Circle Tallahassee, FL 32301



May 29, 2019

**ELIA NADER** 812 GEORGE HECKER DRIVE SOUTH DAYTONA, FL 32119

SUBJECT: BRYAN CAVE ESTATES HOMEOWNER'S ASSOCIATION, INC.

Ref. Number: N29933

We have received your document for BRYAN CAVE ESTATES HOMEOWNER'S ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please only check one (1) box.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 719A00010704

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

Bryan Cave Estates Home Owner's Association

(Name of Corporation	as curre	ntly filed with the Florid	a Dept. of State)	
N29933			·	
(Docu	ment Num	ber of Corporation (if kno	own)	_
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	orida Statu	tes, this Florida Not For	Profit Corporation adopts the follow	ing
A. If amending name, enter the new name of th	e corpora	tion:		
Not Applicable			<i>The</i> n	iew:
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam	•	ation" or "incorporated"		
B. Enter new principal office address, if applica		Not Applicable		
(Principal office address MUST BE A STREET A		D		_
			19	— ; ;
				_ ;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	Not Applicable	1	- 
		-	717	— !
			5	_ {
D. If amending the registered agent and/or regi			nter the name of the	
new registered agent and/or the new register				
Name of New Registered Agent:	Not App			
	Not App		<u> </u>	
New Registered Office Address	(Florida street address)			
	Not Applicable		Chadala.	
_		(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing bereby accept the appointment as registered agen			e obligations of the position.	
	·	·	•	
_		· · · · · · · · · · · · · · · · · · ·		_
		Signature of New Register	ed 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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	Officer	Bohannon, James	924 George Hecker Dr
			South Daytona, FL 32119
Remove			
2) Change	Officer	Childness, Johnathan	
Add			
X Remove			
3 ) Change	Secretary	Friedman, Kimberley	932 George Hecker Dr
X Add			South Daytona, FL 32119
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
1. BOHANNON, JAMES with an address of 924 GEORGE HECKER DR SOUTH DAYTONA, FL 32119 is now an
OFFICER, replacing CHILDNESS, JOHNATHAN
2, FRIEDMAN, KIMBERLEY with an address of 932 GEORGE HECKER DR SOUTH DAYTONA, FL 32119 is now
SECRETARY, replacing BOHANNON, JAMES
Summary: Change James Bohannon's title to Officer; remove Johnathan Childness; Add Kimberley Friedman as Secretary

·. `.	May 6, 2019	
The date of each amendate this document was significant.	ment(s) adoption:	_, if other than the
Effective date <u>if applical</u>	Not Applicable	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will not hon the Department of State's records.	be listed as the
Adoption of Amendmen	t(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were sufficient t	ras/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
There are no membe adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated _	May 8, 2019	
Signature _	Eline III	
(H h	by the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)	_
	Elia Nader	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	