N30782

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COVER LETTER

TO: Amendment Section **Division of Corporations**

Wedgewod M	Manor Homeowners Association, Inc.
N30782	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee:	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Gary Adams	
	(Name of Contact Person)
Wedgewood Manor Homeowners Association	, Inc.
	(Firm/ Company)
37420 Wedgewood Drive	
	(Address)
Zephyrhills, FL. 33542	
	(City/ State and Zip Code)
gd1adams90@gmail.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
Gary Adams	989 8206181
(Name of Contact	Person) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount i	made payable to the Florida Department of State:
\$\$ \$35 Filing Fee \$\Bigs\tag{\$43.75 Filing Fee Certificate of \$}\$	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Taliahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Wedgewod Manor Homeowners Association, Inc.		
(Name of Corporation as currently filed with th	e Florida Dept. of State)	
N30782		
(Docur	nent Number of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not I	For Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
N/A		Tb
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		The new ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	N/A	
(Principal office address MUST BE A STREET		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>) N/A	
		
D. If amending the registered agent and/or reginew registered agent and/or the new register		a, enter the name of the
Name of New Registered Agent:	Jeanne Narum	
rume of wew negatives agent.	5907 Greenberry Ct.	
		Florida street address)
New Registered Office Address	:	
	Zephyrhills	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with and acce	ot the obligations of the position.
	Q	C-nohum=
-	Signature of New Regi	stered 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 Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	Jeanne Narum	5907 Greenberry Ct. Zephyrhills, Fl. 33542
Remove 2) Change Add	<u>v</u>	William Craven	37347 Wedgewood Dr. Zephyrhills, Fl 33542
Remove 3) Change × Add Remove	PTD	Lois Hierholzer	5846 Greenbriar Ct. Zephyrhills, Fl. 33542
4) Change	<u>PTD</u>	Judy Brown	37404 Teaberry Loop Zephyrhills, Fl. 33542
Remove 5) Change	PTD	Jack Jones	37417 Teaberry Loop Zephyrhills, Fl. 33542
Remove 6) Change Add			PR 7: 50
E. If amending or addin (attach additional shee)		cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adopt date this document was signed.	ption:	, if other than the
Effective date if applicable:		
Litetive date if applicable.	(no more than 90 days after amendment file date)	
	does not meet the applicable statutory filing requirements, this date will no	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	

Ħ	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 04/05/23
	Signature (By the chairman or vice chairman of the board, president or other officer-if directors thave not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Jeanne Narum
	(Typed or printed name of person signing)
	President
	(Title of person signing)