N31604

(Requestor's Name)
(Address)
(Address)
(ideal to)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200430589892

ାମ, ଅନ୍ୟୁଷ୍ଟ -ପଞ୍ଚ∤ମ--ପ୍ତମ୍ମ ଖେଷ୍ଟିଲି,ପୁରି



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: <u>Indianwood</u>	Homeowners Ass	ociation, Inc
DOCUMENT NUMBER: N31604		
The enclosed Articles of Amendment and fee are submitted	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
Caryo Schneider		
(Na	me of Contact Person)	
	(Firm/ Company)	
16325 SW Indianwood	od Grele	
	(Address)	
_		
Indiantown, FL 340	156	
(Ci	y/ State and Zip Code)	
hoaiwood 1@ outloo	ok.com	
tmail address; (to be used for	future annual report notificati	on)
For further information concerning this matter, please call	:	
^		
Caryn Schneider (Name of Contact Person)	al 631	804-5238
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department c	f State.
☑ \$35 Filing Fee □\$43.75 Filing Fee & □\$	32.75 Elling Ray B - 17952	50 Filing Fee
Certificate of Status C	Certified Copy Cert	
		ified Copy
	inclosed) (Ade	litional Copy is
	End	losed)
Mailing Address	Street Address	
Amendment Section	Amendment Sec	ction
Division of Corporations	Division of Cor	porations
P.O. Box 6327	The Centre of	Tallahassee
Tallahassee, FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florid	a Dept. of	<u>State</u>)	
Indianwood Homeowners A	ssociat	ion Inc.	Doc # N31604
		rporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this F	Iorida Not For Proj	fit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:		
N/A			The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.			he abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N	A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)		
C. Enter new mailing address, if applicable:	N/A	Ĵ	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1 4 1 .	·	
D. If amending the registered agent and/or registered of	office addre	ess in Florida, enter	the name of the
new registered agent and/or the new registered offic	<u>ce address:</u>		
Name of New Registered Agent:	Laryn	Schneide	<u> </u>
	1		
New Registered Office Address:	$\overline{\Delta}$	(Florida si	reet address)
New Registered Office Address: [X]	<i>[</i> 1		
	(City)	1	, Florida (Zip Code)
	(Cuy)	,	(zīp Coāe)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent:	:	diametrica of elementation
()	und	of New Registered A	
	Signaturé	of New Registered A	gent, 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: XChange X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	P	Larry Guariniello	14419 SW Sand Wedge Drive Indiantown, FL 34956
X Remove 2) X Change Add	<u>P</u>	Ed Skiba	16156 Sw Indianwood Circle Indiantown, FL 34956
Remove 3) Remove	D	Dunna Herclesson	14542 Sw Divot Drive Indian-town FL 34956
4) Change Add	<u>D</u>	Cindy Mirarda	14400 SW Sandbledge Drive Indiantown, FL 34956
	D	Chit Forbush	16004 SW Indianwood Circle Indiantown, FL 34956
Remove 6) Change Add	D	David Jeffs	16407 Sw Two Wood Why Indian town, FL 34956
Remove F.: If amending or a (attach additional) N/A		Articles, enter change(s) here: (b). (Be specific)	

	.	
		<u>-</u>
		
		
		•
		
		** 1
The date of each amendment(s) adoption: date this document was signed.	, if	other than the
Effective date if applicable:		
(n	to more than 90 days after amendment file date)	···
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be list of State's records.	sted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	y the members and the number of votes east for the amendment(s)	

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 5/21/2024
Signature Carpell Schaude
(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)
Caryn A. Schneider (Typed or printed name of person signing)
(Typed or printed name of person signing)
Treasurer
(Title of person signing)