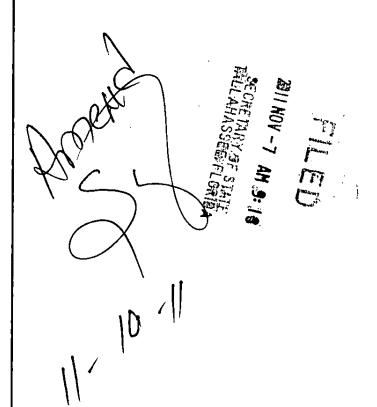


(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies `	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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11/07/11--01003--015 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Spring Hill FOE 4208 Inc					
DOCUMENT NUMBER: N334	109				
The enclosed Articles of Amenda	nent and fee are sul	omitted for fi	ling.		
Please return all correspondence	concerning this mat	ter to the foll	lowing	; :	
Sue Cantara					
	(Name of	Contact Per	son)		
Spring Hill FOE				<u> </u>	
	(Firn	n/ Company)			
8517 Bolton Ave	enue				
	(Address)			
Hudson, Florida	34667				
	(City/ Sta	te and Zip C	ode)		
FOE4208@gmai E-mail	l.com address: (to be use	ed for future a	annual	report notific	ation)
For further information concerning	g this matter, pleas	e call:			
Sue Cantara		at (727	•	_) 247-5195	5
(Name of Contact I	Person)	(Area (Code & Daytin	me Telephone Number)
Enclosed is a check for the follow	ving amount made p	ayable to the	Flori	da Departmen	t of State:
S \$35 Filing Fee ☐ \$43.75 F Certificat	iling Fee & te of Status	□\$43.75 F Certified (Additio enclosed	i Copy nal co	7	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Amendment Section Amendment Section				
Division of Corpor P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32	314			xecutive Cente ssee, FL 32301	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florida Dept. of S	state)
N33409		WILL IT
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, I he following amendment(s) to its Articles of Inc.		Profit Corporation adopts 14
. If amending name, enter the new name of	the corporation:	
he new name must be distinguishable and co bbreviation "Corp." or " Inc." "Company" or		acorporated" or the
. Enter new principal office address, if appl Principal office address MUST BE A STREET		
	 ,	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)	
	***************************************	··········
. If amending the registered agent and/or re		nter the name of the
new registered agent and/or the new regist	tered office address:	
Name of New Registered Agent:		_
New Registered Office Address:	(Florida street address)	
_		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing		
hereby accept the appointment as registered osition.		ept the obligations of the
Sis	gnature of New Registered Agent, if ch	anging

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>	<u>Ad</u>	Address		
1)Pres.	Randy Baim	8517 Bolto	on Avenue		
-/		Hudson, Florid	a 34667		
2) V. Pres.	Frank Majors	8517 Bolton A	\venue		
-) <u></u>		Hudson, Florid	a 34667		
3) Sec.	Sue Cantara	8517 Bolton	Avenue		
, 	******	Hudson Florida	94667		
4) Treas.	Dave Lambert	8517 Bolton	Avenue		
		Hudson, Florid	a 3467		
5)Trustee	Jim Schlegel	8517 Bolton		<u>,</u>	
		Hudson, Flori	da 34667		
6)_Trustee	Jim Hinkle	8517 Bolton A Hudson, Florid	10000		
		Huuson, Florid	34007		
If REMOVING removed:	an officer and/or director, p	lease list the title(s) and n	ame of the officer/	director to be	
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>		
1) Trustee	Nancy Hinkle	4)	 	····	
2)		5)			
3)		6)			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)			
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The Control of the Co	· ·	 		
			<u> </u>	
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	W 1874 - Files - 1			

. The date of each amendmen	t(s) adoption: 10/27/2011
s inc date of each amonumen	(date of adoption- required)
Effective date if applicable:	10/27/2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or madopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Sue Cantara
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)