133941

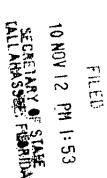
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AMENIA DECEMBER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Landfall Home	owners Associ	ation, Inc.	-
DOCUMENT NU	лмвек: <u>N33941</u>			
The enclosed Artic	cles of Amendment and fee are sub	mitted for filing.		
Please return all co	orrespondence concerning this matt	er to the following:		
		ce Kessler		
	(Name of	Contact Person)		
	Landfall Homeov	vners Association	, Inc.	
	(Firm	Company)		
	POE	OX 34416		
_		ddress)		
	DENCACO	A EL 22507 LIC		
		LA FL 32507 US e and Zip Code)		
*	perdidos E-mail address: (to be used	and@aol.com I for future annual re	port notification)	
For further inform	ation concerning this matter, please	•	,,	
	.			
Bernice Kessle	r	at (850)	454-8775 de & Daytime Telephone Numb	_
(Na	me of Contact Person)	(Area Co	de & Daytime Telephone Numb	er)
Enclosed is a chec	k for the following amount made pa	ayable to the Florida	Department of State:	
☑\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Certified Copy (Additional copy enclosed)	Certificate of St	atus
	ailing Address	Street Ad	dress	
	mendment Section		ent Section	
	ivision of Corporations O. Box 6327	Division of Clifton Bi	of Corporations .	
	illahassee, FL 32314		cutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

LANDFALL HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N33941

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617 1006. Florida Statutes, this Florida Not For Profit Corneration adopts

the following amendment(s) to its Articles of A. If amending name, enter the new name	•
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"	contain the word "corporation" or "incorporated" or the or "co." may not be used in the name.
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STRI</u>	
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF I</u>	
D. If amending the registered agent and/onew registered agent and/or the new re	r registered office address in Florida, enter the name of the gistered office address:
Name of New Registered Agent:	Ted Johnson
	C/O PSRi 10281 Sorrento Rd # C
New Registered Office Address:	(Florida street address)
	Pensacola , Florida 32507
	(City) (Zip Code)
New Registered Agent's Signature, if chand thereby accept the appointment as register position.	red agent. am familiar with and accept the obligations of the
	Signature of New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>D</u>	MCCORT, DAN	4037 LANDFALL DR PENSACOLA FL 32507	□ Add ☑ Remove
<u>P</u>	KERRIGAN, DEBORAH	4012 INDIGO DR PENSACOLA FL 32507	
<u>P</u>	MCCORT, DAN	4037 LANDFALL DR PENSACOLA FL 32507	☑ Add □ Remove
	nding or adding additional Articles, en additional sheets, if necessary). (Be sp		
	(Be sp		
			
			· · · · · · · · · · · · · · · · · · ·
		·	

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)

<u>Title</u>	Name	Address	Type of Action
<u>D</u>	STANDISH, ANGELA	4012 INDIGO DR PENSACOLA FL 32507	Add ☐ Remove
			
	ling or adding additional Articles, ended the design of the section of the sectio		
 			
			,
•			
		· · · · · · · · · · · · · · · · · · ·	

The date of.each amendment(s) ac	doption:	
• Effective date <u>if applicable</u> :	(date of adoption is required)	-
, 	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendme	nt(s)
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/wers.	ere
Dated_\\ll-0\\ Signature_	dernier i Kenton	_
(By the c	chairman or vice chairman of the board, president or other officer-if of been selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	
	Bernice Kessler	
	(Typed or printed name of person signing)	•
	Treasurer	
	(Title of person signing)	

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