

N38430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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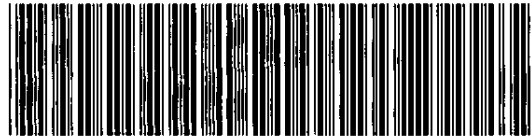
(Business Entity Name)

(Document Number)

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FILED
2010 AUG -5 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

AUG - 6 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

JULY 20, 2010

NAME OF CORPORATION: Villas at Wedgefield, Phase 1, Maintenance Assn. Inc.

DOCUMENT NUMBER: N38430

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia Mitts

(Name of Contact Person)

(Firm/ Company)

2650 Albion Ave

(Address)

Orlando, FL. 32833

(City/ State and Zip Code)

villasatwedgefield@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harold Mitchell

(Name of Contact Person)

at (407) 568-0698

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2010

PATRICIA MITTS
2650 ALBION AVE
ORLANDO, FL 32833

SUBJECT: THE VILLAS AT WEDGEFIELD, PHASE I, MAINTENANCE
ASSOCIATION, INC.
Ref. Number: N38430

We have received your document for THE VILLAS AT WEDGEFIELD, PHASE I, MAINTENANCE 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):

We did not receive the complete document. Enclosed is the third page of the amendment to be completed and returned with page one and two.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 010A00018182

Articles of Amendment
to
Articles of Incorporation
of

FILED
2010 AUG -5 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Villas At Wedgefield, Phase 1, Maintenance Association, Inc.

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

N38430

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

2611 Albion Ave

Orlando, FL.32833

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2611 Albion Ave

Orlando, FL. 32833

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Harold Mitchell

New Registered Office Address:

2611 Albion Ave

(Florida street address)

Orlando

(City)

Florida 32833

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Harold Mitchell

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Nancy Paul	16336 Tudor Lake Court Orlando, FL 32828	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
T	Patricia Mitts	2650 Albion Ave Orlando, FL 32833	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
D	Bill Mitts	2650 Albion Ave Orlando, FL 32833	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

Additional Officers and/or Directors

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
S	Ellis Johnson	2508 Albion Ave Orlando, FL 32833	Change
D	Clark Simms	2648 Albion Ave Orlando, FL 32833	Add
S	Amy Goldie	2563 Albion Ave Orlando, FL 32833	Remove
T	Bob Robert L.	2532 Albion Ave Orlando, FL 32833	Remove

The date of each amendment(s) adoption: 07/25/2001
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ 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 08/02/2010

Signature Harold Mitchell
(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)

Harold Mitchell
(Typed or printed name of person signing)

President
(Title of person signing)