

N39374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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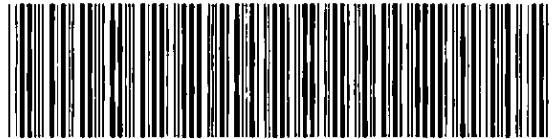
(Business Entity Name)

(Document Number)

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2023 AUG -7 AM 10:29
STATE
CLERK

M

COVER LETTER

TO: Amendment Section
Division of Corporations

Shadow Ridge of Orange City Homeowners' Association, Inc.

NAME OF CORPORATION: _____

N39374

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Mary C. Sweet

(Name of Contact Person)

Shadow Ridge of Orange City Homeowners' Association, Inc.

(Firm/ Company)

805 Laurel Leaf Street

(Address)

Orange City, Florida 32763

(City/ State and Zip Code)

shadowridgeplc@gmail.com

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

For further information concerning this matter, please call:

Mary C. Sweet

407

575-7831

10

(Name of Contact Person)

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATE
DEPT. OF
MILITARY AFFAIRS

2023 JUL -7 AM 10:23

Articles of Amendment
to
Articles of Incorporation
of

Shadow Ridge of Orange City Homeowners' Association, Inc.

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

N39374

(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:

N/A

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:

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

N/A

(Mailing address **MAY BE A POST OFFICE BOX**)

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

Signature of New Registered Agent, if changing

2023 JUN -7 AM 10:29
STATE
SECRETARY
TALLAHASSEE, FL

N/A

2023 AUG -7 AM 10:29
SECRETARY OF STATE
MAIL ROOM

Lined area for text entry.

2023 AUG -7 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FL

The date of each amendment(s) adoption: _____
date this document was signed.

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 08-02-2023

Signature Mary C. Sweet
(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)

Mary C. Sweet

(Typed or printed name of person signing)

Secretary

(Title of person signing)

2023 AUG -7 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FL