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COVER LETTER

NAME OF CORPORATION: HOA OF HUNTERS LAKE DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PAYMOND M GOLD BACH

(Name of Contact Person)

IRAN UNCR - HOR OF HUNTERS LAKE

(Firm/ Company)

12017 HUNTERS LAKE DR

(Address)

NEW PORT RICHET FL 34654

(City/ State and Zip Code) GOLDENGOLDAR Q AOL. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAY MONDM GOLDBACH at 347 613 4695

(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 \$\Bigsup \text{S43.75 Filing Fee & B\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Conv Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Division of Corporations Clifton Building 2661 Executive Center Circle

Street Address

Amendment Section

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED
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		2018 OCT -1 PM 12:
(Name of Corporation as co	urrently filed with the Flo	rida Dept. of State TARY OF STA
		TALLAHASSEE, FI
(Document i	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	<i>Th.</i>
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorporated	d" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered of	Tice address:	
Name of New Registered Agent:		
	NA	
New Registered Office Address:	, rr	lorida street address)
	NA	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	torod Agent:	
I hereby accept the appointment as registered agent. I d	am familiar with and accept	t the obligations of the position.
	NIA	
	Signature of New Regis	tered 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)

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: X Change X Remove X Add	V Mik	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>_b</u>	GREGORY NoceK	12045 HUNZAI LAKEDA NEW BAT RIMY FL 34654
2) Change Add		PAUL GRIFFIN	12025 HUNTERSLAKE DR NEW PORT RENCY FE 34654
Remove 3) Change Add		STOVEN BAKESTASONO	12432 BSGHOW CT NEW PORT ASCHEY FL 34654
 X Remove 4) Change X Add 		MARK DOYON	12103 HUNTER LAKE DA NEW BET RICHET, Fr. 34654
Remove 5) Change Add	<u>)</u>	Debbié De Vato	12203 HUNFER, LAKE DR NEW PORT RICHES FOR 34654
✓ Remove6) Change Add✓ N		PAUL TOGNERS	12146 HUNTER, LAKE DA NEW PORT RICHE, FL 34654
Remove			

) A	۸. ۸	LONS HARRY	11924 TASHA CT
)	00 1/	2010 11410	New Para Rickey FC 31
Aos	٥	JOAN SANTAMARINA	12412 WASAICH CT
		·	Now PORT RAINS, /2 -
Abs) D	MacHAEL TOCZYLOWSKI	12410 BICHORN CT
			NEW PORT RELACT, FL 3
			
			
•			
			
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_ 			

	9/24/10	
The date of each amendment(s) add date this document was signed.	ption:	, if other than th
Effective date if applicable:	N/A	
	(no more than 90 days after amendment file de	'ate)
Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet the applicable statutory filing requirantment of State's records.	arements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast i	for the amendment(s)
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amends.	idment(s) was/were
Dated	124/18	
Signature	1 M SI	
have not been	nah or vice chairman of the board, president or other in selected, by an incorporator – if in the hands of a r ppointed fiduciary by that fiduciary)	
	RAT MOISS M CO-03A(1) (Typed or printed name of person sign	
	(Typed or printed name of person sign	ning)
	MEASURER HOA OF HUNTERS	LAKE
	(Title of person signing)	