

Amend



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2018

MELISA SMITH
PO BOX 3621
TALLAHASSEE, FL 32315

SUBJECT: GOLDEN PARK HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N93000000063

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 818A00025744

RECEIVED
19 JAN -7 PM 3:22
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32315
(850) 245-6050



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 13, 2018

MELISA SMITH
PO BOX 3621
TALLAHASSEE, FL 32315

SUBJECT: GOLDEN PARK HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N93000000063

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

ON PAGE 2 OF 4, PLEASE COMPLETE ITEMS 3, 4 AND 5 FOR TYPE OF ACTION.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 818A00023313

RECEIVED
2018 DEC 14 AM 11:19
CLERK
TALLAHASSEE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Golden Park Homeowners Association I

DOCUMENT NUMBER: 1193 - 63

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

Please return all correspondence concerning this matter to the following:

Melisa Smith
(Name of Contact Person)

P.O. Box 32021 Tall FL 32315
(Address)

Tall FL 32315
(City/ State and Zip Code)

Assoc-Mgt@yahoo.com ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melisa Smith at 850 528 5043
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Golden Park Homeowners Association, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N93-63

(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)

1708 Cordell Dr
Tall FL 32303

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

PO Box 3621
Tall FL 32315

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: Melisa Smith

1708 Cordell Dr Tall FL 32303
(Florida street address)

New Registered Office Address:

Tall, Florida 32303
(City) (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

Melisa C Smith
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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>P</u>	<u>Robert J Botel</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>
2) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>VP</u>	<u>Mike Dimitroff</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>
3) <input checked="" type="checkbox"/> Change <u>Address</u> ____ Add ____ Remove	<u>T</u>	<u>Teddy Payne</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>
4) <input checked="" type="checkbox"/> Change <u>Address</u> ____ Add ____ Remove	<u>D</u>	<u>Chris Scheese</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>
5) <input checked="" type="checkbox"/> Change <u>Address</u> ____ Add ____ Remove	<u>S</u>	<u>Rebekah Weeks</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>
6) <input checked="" type="checkbox"/> Change <u>ASST Secretary</u> ____ Add ____ Remove	<u>ASST</u>	<u>Melisa Smith</u>	<u>Po Box 3621</u> <u>Tall FL 32315</u>

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: Oct 30 2018, if other than the date this document was signed.

Effective date if applicable: Oct 30 2018
(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 11/13/18

Signature Melisa C Smith
(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)

Melisa C Smith
(Typed or printed name of person signing)

Manager ASST Secretary
(Title of person signing)