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## Bowen | Schroth

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Email: zbroome@bowenschroth.com

July 30, 2019

#### Via Regular US Mail

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: Amendment to Articles of Incorporation

Village Green Property Owners' Assoc., Inc.

Document No: N93000001251

#### To Whom It May Concern:

In regard to the above referenced corporation and the amending of the Articles of Incorporation, enclosed is the original Articles of Amendment for Village Green Property Owners' Assoc., Inc. Also enclosed is a check in the amount of \$43.75 payable to the Florida Department of State for the filing of the Articles of Amendment (\$35.00) and Certificate of Status (\$8.75).

Please file the Articles of Amendment and forward the Certificate of Status to our office in the pre-stamped, pre-addressed envelope provided. If you have any questions, please feel free to contact our office at the information listed above.

Sincerely,

Zachar T. Broome

Enclosures

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION:                            | REEN PROPERT         | 'Y OWNERS' AS          | SSOC., II          | NC.  | _ <del></del> . |
|---|----------------------|------------------------|--------------------|--|-----------------|
| N93000001251<br>DOCUMENT NUMBER:                |                      |                        |                    |  |                 |
|   |                      |                        | <u> </u>           |  |                 |
| The enclosed Articles of Amendment and fee      | are submitted for f  | iling.                 |                    |  |                 |
| Please return all correspondence concerning the | is matter to the fol | lowing:                |                    |  |                 |
| Zachary T. Broome, Esq.                         |                      |                        |                    |  |                 |
|   | (Name of             | Contact Person)        |                    | · · · · · · · · · · · · · · · · · · ·                              |                 |
| Bowen Schroth Mazenko and Broome, PA            |                      |                        |                    |  |                 |
|   | (Firm                | / Сотралу)             |                    | <u> </u>   |                 |
| 600 JENNINGS AVE                                |                      |                        |                    |  |                 |
|   | (A                   | Address)               |                    |  |                 |
| EUSTIS. FL 32726                                |                      |                        |                    |  |                 |
|   | (City/ State         | e and Zip Code)        |                    |  |                 |
| ZBROOME@BOWENSCHROTH.COM                        |                      |                        |                    |  |                 |
| E-mail address: (to                             | be used for future   | annual report no       | tification         | )  |                 |
| For further information concerning this matter  | , please call:       |                        |                    |  |                 |
| Zachary T. Broome, Esq.                         |                      | 352<br>at              |                    | 589-1414   |                 |
| (Name of Contact                                | Person)              | (Area                  | (Code)             | (Daytime Teleph  | one Number)     |
| Enclosed is a check for the following amount    | made payable to the  | e Florida Depart       | ment of S          | State:   |                 |
| \$35 Filing Fee  \$43.75 Filing Certificate of  |                      | d Copy<br>enal copy is | Certifi<br>Certifi | O Filing Fee<br>cate of Status<br>ed Copy<br>ional Copy is<br>sed) |                 |
| Mailing Address                                 |                      | Street A               | ddress             |  |                 |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

VILLAGE GREEN PROPERTY OWNERS' ASSOC., INC.

| ł | 1 |          |   |
|---|---|----------|---|
| ı |   | <u> </u> | U |

| (Name of Corporation as  | currently filed with t             | he Florida Dep              | t. of State)            |                        |
|--|------------------------------------|-----------------------------|-------------------------|------------------------|
| N93000001251   |                                    |                             | 2819 AUG - 1            | P 😂 50                 |
| ·  | t Number of Corporation            | 7                           | SECRETARY<br>ALLAHASSEI | OF STATE<br>F. FLORIDA |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:   | Statutes, this <i>Florida</i>      | Not For Profit <sup>*</sup> | Corporation add         | opts the following     |
| A. If amending name, enter the new name of the co  | rporation:                         |                             |                         |                        |
|  |                                    |                             |                         | The new                |
| name must be distinguishable and contain the word "c<br>"Company" or "Co." may not be used in the name.  | orporation" or "incor <sub>l</sub> | porated" or the             | abbreviation "C         | Corp." or "Inc."       |
| B. Enter new principal office address, if applicable   | <u> </u>                           |                             |                         |                        |
| (Principal office address <u>MUST BE A STREET ADD</u>  | RESS )                             |                             |                         |                        |
|  |                                    | • •                         | ·                       |                        |
|  |                                    |                             |                         |                        |
|  |                                    |                             |                         |                        |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.   | <b>X</b> )                         |                             |                         |                        |
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|  |                                    |                             | <del></del> .           |                        |
|  |                                    |                             |                         |                        |
| B. 16  | ad affine adduses in F             | Tanida antan th             | a nama af tha           |                        |
| D. If amending the registered agent and/or register<br>new registered agent and/or the new registered of the n |                                    | <u>ioriua, enter tr</u>     | ie name of the          |                        |
|  |                                    |                             |                         |                        |
| Name of New Registered Agent:  |                                    |                             |                         |                        |
|  |                                    |                             |                         |                        |
| New Registered Office Address:   |                                    | (Florida stree              | et address)             |                        |
| New Registered Office Address.   |                                    |                             |                         |                        |
|  | <del>-</del>                       | . <u> </u>                  | , Florida _             |                        |
|  | (City)                             |                             | (Zip Co                 | ode)                   |
| New Registered Agent's Signature, if changing Reg  | istered Agent:                     |                             |                         |                        |
| I hereby accept the appointment as registered agent.   | I am familiar with and             | accept the oblig            | gations of the po       | sition.                |
|  |                                    |                             |                         |                        |
|  | .,,                                |                             |                         |                        |
|  | Signature of New                   | v Registered Ag             | ent, 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 |              | Doe<br>Jones<br>Smith |                         |
|----------------------------------|--------------|-----------------------|-------------------------|
| Type of Action<br>(Check One)    | <u>Title</u> | Name                  | <u>Addres</u> s         |
| 1) Change                        | VP           | BRUCE KRUMEICH        | 15021 GREEN VALLEY BLVD |
| Add                              |              |                       | CLERMONT, FL 34711      |
| X Remove                         |              |                       |                         |
| 2) Change                        | P            | JOY M LEHNERT         | 14545 SAWGRASS DRIVE    |
| Add                              |              |                       | CLERMONT, FL 34711      |
| X Remove                         |              |                       |                         |
| 3) Change                        | P            | ROBIN REVIS PYKE      | 8725 SPYGLASS LOOP      |
| XAdd                             | <del></del>  |                       | CLERMONT, FL 34711      |
| Remove                           |              |                       |                         |
| 4) Change                        | VP           | STEVEN CAMING         | 8930 SPYGLASS LOOP      |
| $\frac{X}{X}$ Add                |              |                       | CLERMONT, FL 34711      |
| Remove                           |              |                       |                         |
| 5) X Change                      | S            | RANDY NANNA           | 14801 GREEN VALLEY BLVD |
| Add                              |              |                       | CLERMONT, FL 34711      |
| Remove                           |              |                       |                         |
| 6) X Change                      | Board        | JARVIS NELDON         | 8714 AUGUSTA CT         |
|                                  | Member       | <u> </u>              | CLERMONT, FL 34711      |
| Add                              |              |                       |                         |
| Remove                           |              |                       |                         |

| E. If amending or adding additional Articular (attach additional sheets, if necessary). | (Be specific)                         |          |              |
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|  | adoption:, if other than   | the |
|--|--|-----|
| date this document was signed.                                     |  |     |
| Effective date <u>if applicable</u> :                              | (no more than 90 days after amendment file date)   |     |
|  | (no more than 90 days after amenament file date)   |     |
| Note: If the date inserted in thi document's effective date on the | block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.   |     |
| Adoption of Amendment(s)   | (CHECK ONE)  |     |
| The amendment(s) was/we was/were sufficient for app                | re adopted by the members and the number of votes cast for the amendment(s) roval.   |     |
| ☐ There are no members or r<br>adopted by the board of di          | nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.   |     |
| Dated  | 7/30/2019  |     |
| Signature  | LLAS   |     |
| (By the have no  | chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary) |     |
| Rob  | in Revis Pyke  |     |
| _  | (Typed or printed name of person signing)  |     |
| Pres   | ident  |     |
|  |  |     |