N93000001517

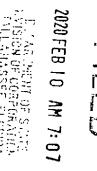
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ETREAT HOMEOV	VNERS ASSO	CIATION	E, INC.	
N93000001517					
The enclosed Articles of Amendment and fe	e are submitted for fi	ling.			
Please return all correspondence concerning	this matter to the fol	lowing:			
Lefteris Velivasakis					
	(Name of C	Contact Person)		
	(Firm/	Company)			
2126 Oak Forest Lane					
	(Λ	ddress)			
Palm Harbor, FL 33770					
	(City/ State	and Zip Code)		· · ·
board@forestretreathoa.com					
E-mail address: (t	o be used for future	annual report n	otification	1)	
For further information concerning this matte	er, please call:				
Lefteris Velivasakis		914 at		471-5828	
(Name of Conta	ct Person)		ea Code)	(Daytime Telephor	ne Number)
Enclosed is a check for the following amoun	t made payable to the	e Florida Depa	rtnient of	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate o	f Status — Certified	Copy nal copy is	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section			Address	ion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FOREST RETREAT HOMEOWNERS ASSOCIATION, INC.

Name of Corporation as currently filed with the Florida 1	Dept. of State)			
N93000001517				
(Document Numb	per of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the corporat	tion:			
	The new			
name must be distinguishable and contain the word "corporal "Company" or "Co." <u>may not be</u> used in the name.	ition" or "incorporated" or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable:	2125 Oak Forest Lane			
(Principal office address MUST BE A STREET ADDRESS	Palm Harbor, FL 33770			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FOREST RETREAT HOMEOWNERS ASSOCIATION, INC			
	801 West Bay Drive, Suite 485 Largo, FL 33770			
	Largo, FL 33770			
D. If amending the registered agent and/or registered office	ce address in Florida, enter the name of the			
new registered agent and/or the new registered office a	iddress:			
Name of New Registered Agent:				
New Registered Office Address:	(Florida street address)			
	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Thereby accept the appointment as registered agent. I am far	Agent: miliar with and accept the obligations of the position.			
	ignature 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: X Change X Remove X Add	PT John De V Mike Je SV Sally St	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change × Add	PD	Langrock, Paul	2166 Oak Forest Lane Palm
Remove			
2) Change Add	VTD	Veljvasakis, Lefteris	2126 Oak Forest Lane PAlm Harbor, FL 34683
Remove 3) Remove Add × Remove		Calobrisi, Tony	
4) Change Add		BENNAWIT, BART	
Remove			
5) × Change Add	<u>SD</u>	Soult, Mike	1234 Passage Way Plainfield, IN 46168
Remove			
6) Change Add			
Remove E. If amending or addin	g additional Arti	Page 2 of 4 cles, enter change(s) here:	
(attach additional shee	ts, if necessary),	(Be specific)	

date this document was signed	:(8) adoption: 2/1/2020		 if other than the
The date of each awards	ets) adoption		(F = 0
		*	
		Page 3 of 4	
		-	
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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 2/1/2020 Signature 2. Signature				
(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)				
Lefteris N. Velivasakis				
(Typed or printed name of person signing)				
Vice President, Treasurer, Director				
(Title of person signing)				