N930003808

(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	s of Status
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2018 OCT 31 PM 3: 25
SEGNETARY OF STATE

C. GOLDEN NOV -1 2018

COVER LETTER

Division of Corporations NAME OF CORPORATION: Riverwind Core Home NUNOVS ASSOCIATION, INC N93000003808 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bisplinghoff, Treasurer Riverwind Core Homeowners Assoc. Inc. Box 165 4 Iva FL 339
(City/ State and Zip Code) 5eb 623 @ hot mail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sue Bispinghoff at 39-980-2470 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: previously submitteel ■\$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed)

Mailing Address

TO: Amendment Section

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



October 1, 2018

SUSANNE BISPLINGHOFF 18031 RIVERCHASE COURT ALVA, FL 33920

SUBJECT: RIVERWIND COVE HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N93000003808

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):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

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.

Claretha Golden Regulatory Specialist II

Correction included

Letter Number: 718A00020334

Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT 31 PM 3: 25

(Name of Corporation as	currently	filed with the Florida Dept. of State)	SECRETARY OF STATE TALL AHASSEE, FL		
RIVERWIND COVE HOMEOWNERS ASSOCIA	TALLAHASSEE, FL				
(Documen	t Number	of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes,	this Florida Not For Profit Corporation	adopts the following		
A. If amending name, enter the new name of the co	rporation	<u>:</u>			
			The new		
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporatio	n" or "incorporated" or the abbreviation	n "Corp," or "Inc."		
B. Enter new principal office address, if applicable:		Joshua Dorcey			
(Principal office address MUST BE A STREET ADL	ODECC)	6490 Oakview Circle			
	<u> </u>	Niva, FL 33920			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	- (<u>X</u>) _		····		
D. If amending the registered agent and/or register new registered agent and/or the new registered	office add	iress:	<u>he</u>		
The state of the s		lamczyk, DoBoest & Cross, PLLC			
6	609 Willo	w Park Dr			
New Registered Office Address:		(Florida street address)			
	laples	, Flori	34109		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	I am fami	(City) (Zij	n Code) e position.		

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		<u>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	President	Joshua Dorcey	16490 Oakview Circle
Add			Alva, FL 33920
Remove			
2) X Change	VP	Bryson Clark	16461 Oakview Circle
Add			Alva, FL 33920
Remove			·
3) Change			-
Add			
Remove			
4) Change			
Ađd			
Remove			
5) Change			
Add			
Remove			····
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)			
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	date of each amendment this document was signed		, if other than the
•	ective date <u>if applicable</u> :	July 28, 2018	
		(no more than 90 days after amendment file date)	
<u>Not</u> doci	e: If the date inserted in thument's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be department of State's records.	be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
▣	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Dated	28, 2018	
	Signature		
	have n	chairman or vice chairman of the board; president or other officer-if directors ot been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
	Jos	shua Dorcey	
	_	(Typed or printed name of person signing)	
	7	Title of person signing)	
		(Title of person signing)	