Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FAEHNER PLLC
Account Number : I20170000081
Phone : (727)306-0202
Fax Number : (727)474-9949

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please..

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ISLEWORTH HOMEOWNERS ASSOCIATION, INC.

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Corporate Filing Menu

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TO: Amendment Section

To: 18506176380

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From: Faehner PLLC

Fax: 727474994!

COVER LETTER

Division of Corporation	ns			
NAME OF CORPORATION		MEOWNERS ASSOC		
DOCUMENT NUMBER:	N94000000211			
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	ter to the following:		
Michael Faehner				
		(Name of Contact Pe	erson)	
ISLEWORTH HOMEOWY	NERS ASSOCIATION, I	NC.		
		(Firm/ Company	y)	A, U
1801 Isleworth Court				
		(Address)		
Oldsmar, FL 34677				
		(City/ State and Zip	Code)	
michael@faehner.law				
E	-mail address: (to be use	d for future annual rep	port notificatio	n)
For further information con-	cerning this matter, please	e call:		
Michael Fachner		at	-	306-0201
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed)

Articles of Amendment to Articles of Incorporation of

ISLEWORTH HOMEOWNERS ASSOCIATION, I	NC.	
Name of Corporation as currently filed with the F	lorida Dept. of State)	
N94000000211		
(Documer	nt Number of Corporation (if kr	iown)
Pursuant to the provisions of section 617.1006, Florid imendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:	
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name	corporation" or "incorporated	The new I'' or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable of the principal office address MUST BE A STREET ADDRESS OF THE ADDRESS OF THE PRINCIPAL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registence new registered agent and/or the new registered	ered office address in Florida, office address:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(FI	lorida street address)
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, If changing Re hereby accept the appointment as registered agent.		the obligations of the position.
· · ·	·	TALL SE
	Signature of New Registe	ered Agent. if changing

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From: Faehner PLLC

Fax: 727474994

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 Do V Mike Jo SV Sally Sr	ncs			
Type of Action (Check One)	_Title	Name	Address		
1) Change Add	VP	GEHEB, CLAIRE	1806 Isleworth Court OLDSMAR, FL 34677		
x Remove					
2) Change Add	VP	Bieterman, Amy	1806 Isleworth Court OLDSMAR, FL 34677		
Remove 3) Change Add Remove					
4) Change Add					
Remove					
5) Change Add		<u> </u>			
Remove					
6) Change Add					
Remove					
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
NONE					

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Ta: 18506176380

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From: Faehner PLLC Fax: 7274749949

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				······································	
The date	date of each amendment(s) ad this document was signed.	Roption: 8/31/2021			, if other than the
Effe	ctive date <u>if applicable</u> :			<u> </u>	
		(no more than 90 days			
Note docu	If the date inserted in this blo iment's effective date on the De	ck does not meet the applical partment of State's records.	ole statutory filing req	uirements, this date will no	ot be listed as the
Ado	ption of Amendment(s)	(CHECK ONE)			
	The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and that.	ne number of votes ca	st for the amendment(s)	

September 11, 2021 Dated

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)

Michael J. Fachner

To: 18506176380

(Typed or printed name of person signing)

President

(Title of person signing)