| (Requestor's Name) | | | | |
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| PICK-UP WAIT M | AIL | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status _ | | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations Magnolia Bay Homeowner's Association Inc. NAME OF CORPORATION: _ N96000000378 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Laura B Fisher (Name of Contact Person) Fisher & Friedman PA (Firm/ Company) PO Box 310 (Address) Eastpoint, FL 32328 (City/ State and Zip Code) laura@tisher-friedman.com E-mail address: (to be used for future annual report notification) For further information concerning this mater, please call: 670-4016 Laura B Fisher 850 (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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Comorations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

17 NOV -3 PH 4: 32

Magnolia Bay Homeowner's Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of Sta N96000000378 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

Page 1 of 4

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

| P = President; V = Vie | r/director title by ce President; T= O = Chief Finan | cial Officer. If an officer/director hol | or; TR= Trustee; C = Chairman or Clerk; CEO = Chief ds more than one title, list the first letter of each office |
|--|--|--|---|
| Changes should be no a change, Mike Jones Mike Jones, V as Rem | leaves the corpor | ration, Sally Smith is named the V and | sted as the PST and Mike Jones is listed as the V. There is d.S. These should be noted as John Doe, PT as a Change, |
| Example: X_Change X_Remove X_Add | <u>V</u> <u>Mi</u> | in Doe ke Jones ly Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | PD | Jimerson. Doug | 280 Bay Holly Court |
| Add Remove | | | Eastpoint, FL 32328 |
| 2) Change | TD | Buckley, John | 243 Magnolia Bay Drive |
| X Add | | | Eastpoint, FL 32328 |
| Remove X Change | PD | Ard, Marty | PO Box 626 |
| Add | | | Eastpoint. FL 32328 |
| Remove | | | |
| 4) Change | | | |
| Add | | | - 4 U |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |

Page 2 of 4

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). (Be specific) | |
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| October 21, 2017 | if other than the |
|--|-------------------|
| 'he date of each amendment(s) adoption:ate this document was signed. | |
| ffective date if applicable: | <u> </u> |
| (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 ocument's effective date on the Department of State's records. | ellisted as the |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adopted by the members and the number of votes cast for theamendment(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 10/27/17 | i. |
| Signature W. Mark as | _ |
| (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) | |
| W. Martin Ard | 1 |
| (Typed or printed name of person signing) | |
| President | i . |
| (Title of person signing) | |