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COVER LETTER

TO: Amendment Section Division of Corporations

Fish Hawk Trails NAME OF CORPORATION:	Homeownwers Asso	ciation, Inc.	
N96000001317 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Richard Pitrowski			
	(Name of Contact Pe	rson)	<u></u>
Merit, Inc.			
	(Firm/ Company	·)	
3433 Lithia Pinecrest Road, #301			
	(Address)		
Valrico, FL 33596			
	(City/ State and Zip	Code)	·
accounting@thefloridasolutionsgroup.com			
E-mail address; (to be use	ed for future annual rej	ort notificatio	n)
For further information concerning this matter, pleas	e call:		
Krista Richey	at	813	381-5435
(Name of Contact Perso			(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida I	Department of	State:
■ \$35 Filing Fee □S43.75 Filing Fee & Certificate of Status	≥ □\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif (Add:	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		reet Address nendment Sect	ion
Division of Corporations		vision of Corp	

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

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FISH HAWK TRAILS HOMEOWNERS' ASSOCIATION, INC.

(Name of Corporation as curre	ently filed with the Flor	ida Dept. of State)	
N96000001317			
(Document Num	nber of Corporation (if ki	nown)	
ursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ites, this Florida Not Fo	r Profit Corporation adopts the follo	wing
. If amending name, enter the new name of the corpora	ation:		
NIA		The	new
une must be distinguishable and contain the word "corpor Company" or "Co," may not be used in the name.	cation" or "incorporatea		
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>	s, NA		
		ZOIO TALL	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA	JUL -9 P	- - آ ا
. If amending the registered agent and/or registered of	fice address in Florida,	enter the name of the	;— ? •
new registered agent and/or the new registered office			
Name of New Registered Agent: \(\infty\)	A		
New Registered Office Address:	(FI	orida street address)	
		, Florida	
	(City)	, Florida (Zip Code)	
ew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		the obligations of the position.	
	Signature of New Regist	tered 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	<u>V</u> <u>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Vincent, Jarret	c/o Merit Management
Add			3433 Lithia Pinecrest Rd. #301
X Remove			Valrico, FL 33596
2) Change	DT	Bohra, Ned	c/o Merit Management
Add			3433 Lithia Pinecrest Rd. #301
X Remove			Valrico, FL 33596
3) Change	D	Horton, Miriam	c/o Merit Management
X Add			3433 Lithia Pinecrest Rd. #301
Remove			Valrico, FL 33596
4) Change	D	Schwinn, David	c/o Merit Management
X Add			3433 Lithia Pinecrest Rd. #301
Remove			Valrico, FL 33596
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or ad</u> (attach additional s	ding additional Article heets, if necessary). (f	s, enter change(s) Be specific)	here:		
NA					
		,			
-					
				<u> </u>	
		-			
					
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The late	e date of each amendment(s) adoption: 28 SUN 18 e this document was signed.	, if other than the
em	fective date if applicable:	
	(no more than 90 days after amendment file date)	. <u> </u>
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be current's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 Z8JUN 18	
	Signature Ularum, S.	_
	(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)	
	Bill Wright	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	