N96000003694

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DOCWOOD CREEK HILL HOMEDWNERS ASSOC
DOCUMENT NUMBER: N9600003694
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CARMEN WORLEY (Name of Contact Person)
(Name of Contact Person)
-
(Firm/ Company)
1431 W 9 MILE RO APT 11301 (Address)
, (Address)
PENSACOLI FL 32534 (City/ State and Zip Code)
(City/ State and Zip Code)
CARMEN WORLEY @ GMAIL-('C)7 E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHANE STATON at 850 - 380 - 5600 (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 S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Amendment Section Amendment Section

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 NIA

Articles of Amendment

to

$\mathcal{N}U$	Articles of Incorporation of	
Degwood Creek H	till Homeowners	Association, Inc.
	0003694	
(Docum	ent Number of Corporation (if know	אה)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
NIA		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET ALL)		
The party of the markets MOST BE ASTREET AT		201
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ox) N/A	AS T
(maining dutiress MAT BE A FOST OF FICE B	<u> </u>	SS ≥ N
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, en d office address:	ter the name of the
Name of New Registered Agent:	NA	
•	(Florid	la street address)
New Registered Office Address:		
_		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position.
_	Signature of New Registere	d 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 D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u> s
1) Change	<u>P</u> _	PETER GRIFFIN	NK
Add			
2) Change		GARY SUNDERLAND	NIR
Add Remove 3) Change	<u></u>	SHANE STATON	2151 WINDHAM DR
			MOLIND FL 32577
4) Change X_ Add Remove	T	CARMEN WURLEY	1431 W 9 MILE RD UNIT 11301 PENSACOLA, FL, 3253
5) Change Add			
6) Change			
Remove			

f amending or adding additional Artic attach additional sheets, if necessary).	(Be specific)				
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		N/A			
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	e date of each amendment(s) adoption: 3/1//9 this document was signed.	, if other than the
	ective date if applicable: 3/1/19 (no more than 90 days after amendment file date)	<u> </u>
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	: listed as the
Ado	option of Amendment(s) (CHECK ONE)	
Þ	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 3/11/19	
	Signature 3/1/19 (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)	
	Carmen D. Worley (Typed or printed name apperson signing)	
	Secretary Tresuver (Title of person signing)	