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C. GOLDEN KIY 2 4 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Benford Heights Homeowner's Association, Inc.
DOCUMENT NUMBER: N 98000 00 4549
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David R. Whann (Name of Contact Person)
(Firm/ Company)
2581 Colonel Ford Dr. (Address)
Lakeland FL 33813 (City/ State and Zip Code)
Benford height show g mail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David R. Whann at (863) 528-5748 (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
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Benford Heigh	Nts Homeowner's Association, In
(Name of Corporation as c	currently filed with the Florida Dept. of State)
AL Q82	000004549
(Document	O O O O U S U 9 Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida 3 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 cor	rporation:
	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDE</u>	<u>RESS</u>)
C. Enternamenting address (Complicables	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	ý)
na de la companya de	A promise of the state of the s
D. If amending the registered agent and/or registered new registered agent and/or the new registered o	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
New Regimered Office Hadress.	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	
	am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

FILED

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>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	.D <u>.</u> V	Miriam Vates	2538 Colonel Ford Dr. Lakeland, FL 33813
2) Change Add Remove	_V	Roz Tyre	2461 Colonel Ford Dr. Lakeland, FL 33813
3) Change Add Remove	_5_	Amy Whann	2581 Colonel Ford Dr. Lakeland, FL 33813
4) Change Add Remove	 -		
5) Change Add Remove			
6) Change Add Remove			

tach additional sheets, if necessary).	(ве ѕресую)					
					<u></u>	
						
						
						
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				-		
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The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> :	March 18 2018 (no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiremed Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes east for troval.	he amendment(s)
There are no members or madopted by the board of dir		nt(s) was/were
Dated	5/20/18 al l.c	
Signature	al l.c	
have no	hairman or vice chairman of the board, president or other off been selected, by an incorporator – if in the hands of a recei urt appointed fiduciary by that fiduciary)	
	David R, Whanh (Typed or printed name of person signing)
	PresideNT (Title of person signing)	