N980000004672

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



400326370234

D3 (1) (9--0)(1) 1--003 **2...(

04/10/19--01002--010 **10.00

R. WHITE APR 1 0 2019





March 30, 2019

SCOTT FISHER 231 SW JADE CT FORT WHITE, FL 32038

SUBJECT: COLUMBIA SOUTHFORK HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N98000004672

We have received your document for COLUMBIA SOUTHFORK HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience:

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist III

2019 APR

Letter Number: 919A00006347

COVER LETTER

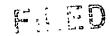
TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: COLUMBIA S	OUTHFORK HOM	EOUNERS ASSOCIATION, INC
DOCUMENT NUMBER: ,	N980000046	72	
DOCUMENT NUMBER.	1,000 000 10	.,	
The enclosed Articles of Am	endment and fee are subm	itted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	500	T FISHER Name of Contact Perso	•
	(Name of Contact Perso	n)
COLUMBIA SOL	THFORK HOM	ECUNERS 1	750CLATION, INC.
		(Firm/ Company)	,
23(S.W. JANE	ARMIRT	
	S.W. JADE	(Address)	
FORT	WHITE FL	<i>3</i> 2038	
	(City/ State and Zip Coo	le)
,	ا س	, ,	.1_
<u>sando</u>	Fisherew mail address: (to be used	indstream	7: REC
L	-man address. (to be used	ior rature annual report	notification)
For further information conc	erning this matter, please o	all:	

- SCOTT	FISHER (Name of Contact Person)	at	386-497-4125 rea Code) (Daytime Telephone Number)
	(Name of Contact Person)	(Λ	rea Code) (Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Dep	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
		0.	· ,
Mailing A Amendme			Address dment Section
	Division of Corporations Division of Corporations		
P.O. Box 6		Clifton Building	
	Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment



Articles of Incorporation of

	2019 APR 10 PH 3: 08
COLUMBIA SOUTHFORK HOMEOLUNE	KS ASSOCIATION, INC.
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
N98000004672	CALL TO SERVICE STATE OF THE S
	imber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	nutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
	231 S.W. JADE COURT
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	231 S.W. JADE COURT SS) FORT WHITE FL 32038
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	231 S.W. JADE COURT
	FORT WHITE FL 32038
D. If amending the registered agent and/or registered onew registered agent and/or the new registered officers.	
Name of New Registered Agent:	SCOTT FISHER
	231 S. W. JADE COURT (Florida street address)
New Registered Office Address:	(Florida street address)
F	City) Florida 32038 (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	
	Scott Lisher
	Signature of New Registered Agent, if changing

Page 1 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)

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.

Add	Example: X Change X Remove X Add		Doe Jones Smith	
Add		<u>Title</u>	<u>Name</u>	<u>Addres</u> s
2) Change	Add	TS_	ILONA BURTON	420 S. W. GRASSY LAWE FORT WHITE FL 32088
3) Change Add	2) Change	TS	SCOTT FISHER	231 S.W. JADE COURT FORT WHITE FL32038
4) Change	3) Change			
5) Change	4) Change			
6) Change	5) Change			
	6) Change		, <u></u>	

And the second

The date of each amedate this document wa	endment(s) adoption: is signed.	3-15-2019	, it other than the
Effective date <u>if appl</u>	icable:	3-15-2019	
<u></u>		more than 90 days after amendment file date)	
	rted in this block does no late on the Department o	of meet the applicable statutory filing requirement f State's records.	s, this date will not be listed as the
Adoption of Amenda	nent(s) (<u>Cl</u>	HECK ONE)	
The amendment(was/were sufficient	•	he members and the number of votes east for the	amendment(s)
	nbers or members entitle oard of directors.	d to vote on the amendment(s). The amendment(s) was/were
Dated	3-15-	2019	
Signatur	e Soutt 4	Tisher	
·	(By the chairman or vic	e chairman of the board, president or other office, by an incorporator – if in the hands of a receive fiduciary by that fiduciary)	
	5 co	T FISHER	
		(Typed or printed name of person signing)	
	_ TREASI	URER-SECRETARY	
		(Title of person signing)	