## N9900006124

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

				ř
NAME OF CORPORATION	PELICAN BAY CO	MMUNITY HOMEO	WNERS ASS	OSCIATION, INC
DOCUMENT NUMBER: ,	N99000006124			
The enclosed Articles of Am		nitted for filing		
·		_		
Please return all corresponde	ence concerning this matte	er to the following:		
Rebecca Lamey				
		(Name of Contact Per	son)	
Pelican Bay Community Ho	omeowners Association, In	nc.		
		(Firm/ Company)	l	
208 Exuma Drive				
		(Address)		
Mieco, FL 32976				
·		(City/ State and Zip C	ode)	,
rlamey28@yahoo.com				
E	-mail address: (to be used	for future annual repo	ort notification	1)
For further information conc	erning this matter, please	call:		
Rebecca Lamey			2288604173	
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pa	yable to the Florida D	epartment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		Certifi Certifi	D Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A			et Address	
	nt Section	Amendment Section Division of Corporations		
Division of Corporations		ועום	ision of Corpo	лаиона

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida D	ept. of State)		
PELICAN BAY COMMUNITY HOMEOWNERS ASSOCIA	ATION, INC.	119900/16/	17
(Document Number	er of Corporation (if l	(nown)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not F</i>	or Profit Corporation adopts the following	owing
A. If amending name, enter the new name of the corporati	on:		
N/A		Th	e new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporate		
B. Enter new principal office address, if applicable:	N/A	~~	.5
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		(	
			<del>ر</del> ي ح
			-p::
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		بن
			0.0
			_
D. If amending the registered agent and/or registered office		, enter the name of the	
new registered agent and/or the new registered office a	<u>ddress:</u>		
Name of New Registered Agent: N/A			
	(F	lorida street address)	
New Registered Office Address:			
<u></u>		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent. I am fan	niliar with and accep	t the obligations of the position.	
Sij	gnature of New Regis	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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

,	•		
Example: X Change X Remove X Add		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Sharon Corbin	153 Exuma Drive Micco, F:L 32976
Remove			
2) Change Add	<del></del>		
Remove 3) Remove Add Remove	<del></del>	<del></del>	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove		Page 2 of 4	
E. If amending or ad (attach additional si		Articles, enter change(s) here:  (Be specific)	
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N/A			
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	Page 3 of 4	
The day of each annual and A ad	option:	if other than the
date this document was signed.	option:	n outer than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	ino more than 20 days after amenament file date)	
<u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s)	

There are no men adopted by the bo	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.  January 18, 2021
Dated	<del>-</del>
Signature	e
	(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)
	Kathleen Ollis
	(Typed or printed name of person signing)
	(Title of person signing)