

P14 0000 61321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

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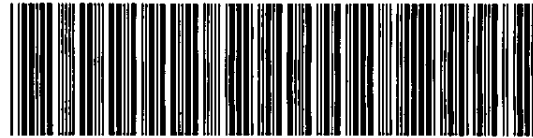
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CRM
9-16-14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Homes Association Inc.

DOCUMENT NUMBER: P14000061321

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carlos E. Torres
Name of Contact Person

Florida Homes Association
Firm/ Company

3387 W. Vine St. Suite 305 Kissimmee FL 34741
Address

Kissimmee, FL 34741
City/ State and Zip Code

info@logicmasys.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos E. Torres at (407) 674-9999
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 | ☐ \$43.75 Filing Fee &
Certificate of Status | ☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | ☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|--|

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

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

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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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change
☐ Add
☒ Remove

V

Luis A. Cabrera

1016 Barcelona Dr.
Kissimmee, FL 34741

- 2) ☐ Change
☐ Add
☒ Remove

Elizeu S. Camargo

2017 Bridgeview Cir.
Orlando FL 32824

- 3) ☐ Change
☒ Add
☐ Remove

D

Janina Santiago

4903 Banning Street
Lehigh Acres FL 33971

- 4) ☐ Change
☒ Add
☐ Remove

S

Luz Marie Zavala

1970 Willow Wood Dr.
Kissimmee FL 34746

- 5) ☐ Change
☐ Add
☐ Remove

- 6) ☐ Change
☐ Add
☐ Remove

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TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 9/2/2014, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 9/2/2014

Signature

Carlos E. Torres

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Carlos E. Torres

(Typed or printed name of person signing)

President

(Title of person signing)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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