

Florida Department of State

N 040000 WTB
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: tucker.thoni@gray-robinson.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
SOUTH AOPKA PROPERTIES, INC.**

Certificate of Status	0
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COVER LETTER

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**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: SOUTH AOPKA PROPERTIES, INC.

DOCUMENT NUMBER: N04000001673

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

Please return all correspondence concerning this matter to the following:

Tucker Thoni

(Name of Contact Person)

GrayRobinson, P.A.

(Firm/ Company)

301 E. Pine Street, Suite #1400

(Address)

Orlando, FL 32801

(City/ State and Zip Code)

tucker.thoni@gray-robinson.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tucker Thoni, Esq.

(Name of Contact Person)

407

at

843-8880

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

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Articles of Amendment
to
Articles of Incorporation
of

SOUTH APOFKA PROPERTIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

NO4000001673

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ ^{The new}
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address: _____

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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 Removes, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>DT</u>	<u>Randy Houser</u>	<u>3414 Galilee Road</u> <u>Jacksonville, FL 32207</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S</u>	<u>James Tobin</u>	<u>200 Malaga Court</u> <u>Merrit Island, FL 32953</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>M</u>	<u>Gregory F Diehl</u>	<u>3 Frank Jones Road</u> <u>Crawfordville, FL 32327</u>
<input checked="" type="checkbox"/> Remove			
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	<u>D</u>	<u>Eric Jones</u>	<u>728 West Avenue</u> <u>Cocoa, FL 32927</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>D</u>	<u>Cecilia Reid</u>	<u>1033 N. Pine Hills Road</u> <u>Orlando, FL 32808</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>D</u>	<u>Joseph Regan</u>	<u>1033 N. Pine Hills Road</u> <u>Orlando, FL 32808</u>
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

7) Add as Director: Thomas Jackson, Address: 1033 N. Pine Hills Road, Orlando, FL 32808

Eric Jones, Cecilia Reid, Joseph Regan and Thomas Jackson are the only members of the board of directors.

All other directors are hereby removed.

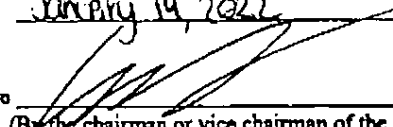
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There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated January 19, 2022

Signature


(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)

ERIC R. JONES

(Typed or printed name of person signing)

Director

(Title of person signing)