## 746036

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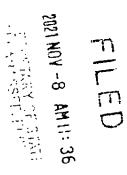
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	The Bluffs Cluster	Homes Association, Ir	nc.	
DOCUMENT NUMBER:	746036			
The enclosed Articles of Ar	nendment and fee are sub	omitted for filing,		
Please return all correspond	lence concerning this mat	ter to the following:		
Anshacher Law				
		(Name of Contact Pe	erson)	
Attention: Hannah Rullo, E	.sq.			
		(Firm/ Company	·)	
8818 Goodbys Executive I	Prive, Suite 100			
	·	(Address)	_	
Jacksonville, Florida 32217	,			
	<u> </u>	(City/ State and Zip	Code)	· - · · ·
hsr@ansbacher.net - please	use sarahhbohr@aol.con	n for annual report not	ifications	
	-mail address: (to be use	d for future annual rep	xori notification	n)
For further information con-	cerning this matter, pleasa	e call:		
Hannah Rullo		est.	904	737-4600 x 202
	(Name of Contact Persor	nt	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida l	Department of	State:
■ \$35 Filing Fee	□\$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	D Filing Fee icute of Status icd Copy tional Copy is seed)
Mailing Amendm	Address		reet Address	ion

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tullahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

The Bluffs Cluster Homes Association, Inc.

Name of Corporation as currently filed with the Florida	Dept. of State)	2021 NOV -8	- - AM 11+ 2
746036		LULI 1101 U	WILLY. D
(Document Num	iber of Corporation (if known)	JAN ATARY JAN ARGASS	- 05 37478
Pursuant to the provisions of section 617.1006, Florida Statu intendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit</i> (	Corporation adopts the following	所 (Linuxyyy
A. If amending name, enter the new name of the corpora	ntion:		
Atlantic Beach Estates Condominium Association, Inc.		The nev	4'
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the	abbreviation "Corp " or "Inc."	•
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES:	N/A		-
			-
C. Enter new mailing address, if applicable:			
(Malling address MAY BE A POST OFFICE BOX)	N/A		-
		· · · · · · · · · · · · · · · · · · ·	-
<ol> <li>If amending the registered agent and/or registered of new registered agent and/or the new registered office</li> </ol>		e name of the	
N/A			
Name of New Registered Agent:		······································	_
New Registered Office Address:	(Florala street	( address)	-
N/A			
1974	(City)	, Florida (Zip Code)	-
New Registered Agent's Signature, it changing Registere thereby accept the appointment as registered agent. I am f	d Agent;	· •	
	Signature of New Registered Age.	nt, 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 Doc 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.

X Change X Remove X Add	<u>ΡΤ</u> <u>Υ</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add		N/A	
Remove			
2) Change Add		N/A	
3 ) Remove 3 ) Change Add Remove		N/A	
4) Change Add		N/A	
Remove			
5) Change Add		N/A	
Remove			
o) Change Add		N/A	
Remove			
E. If amending or addi- (uttach additional she	ng additio ers, if nece	nal Articles, enter change(s) here: ssary). (Be specific)	
N/A			

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The date of each amendment date this document was signed	t(s) adopt	ion:							, if other than the
_	N/A								
Effective date <u>if applicable</u> :		<del></del>	at out t						
			• than 90 da						
Note: 10 the date inserted in the document's effective date on t	tis block d he Depart	loes not me ment of Sta	et the appli ite's records	eable statui s,	ory filing	requireme	nts, this date	will not b	e listed as the
Adoption of Amendment(s)		(CHEC	K ONE)						
■ The amendment(s) was/w	rere adopt	ed by the m	embers and	I the numb	er of votes	east for th	ie amendme	nt(s)	

was/were sufficient for approval.

Dated October 26, 2021	
Signature & H Mac	
(By the chairman or vice chairman of the board, pre- have not been selected, by an incorporator – if in the other court appointed fiduciary by that fiduciary)	
Sarah Bohi	
('I vped or printed name)	of person signing)

(Title of person signing)

. . . .