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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	——————————————————————————————————————	PROPERTY OWN	- ASSOCIA	TION, INC.	-
7555 DOCUMENT NUMBER:		_			_
The enclosed Articles of Amend	ment and fee are sub	nitted for filing.			
Please return all correspondence	concerning this matte	er to the following:			
DANIELLE MCDONOUGH					
		(Name of Contact P	erson)		_
GREGOR WOODS PROPERT	Y OWNERS' ASSOC	IATION, INC.			
		(Firm/ Compan	iy)		_
6526 S Kanner Hwy #253					
<u> </u>		(Address)			_
Stuart, FL 34997					. 3
		(City/ State and Zip	Code)		: نــ
GregorWoodsPOA@gmail.com				-	 · \
E-ma	il address: (to be used	for future annual re	port notification	1)	بب ـ
For further information concerni	ng this matter, please	call:			· ·
DANIELLE MCDONOUGH		а	772 t	888-5755	:: 급 _
(Na	me of Contact Person			(Daytime Telephone Number)	
Enclosed is a check for the follo	wing amount made pa	ayable to the Florida	Department of	State:	
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	Filing Fee licate of Status lied Copy licate Copy lica	
Mailing Adds Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations	A D T	treet Address mendment Sectivision of Corpo he Centre of T 415 N. Monroe	prations	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

GREGOR WOODS PROPERTY OWNERS' ASSOCIATION, INC.

(Name of Corporation as currently filed with th	e Florida	Dept. of State)	
755535			
(Docur	nent Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statut	es, this Florida Not For Profi	t Corporation adopts the following
A. If amending name, enter the new name of th	e corpora	tion:	
			.The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ition" or "incorporated" or th	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if application	able:	6526 S Kanner Hwy #253	
(Principal office address <u>MUST BE A STREET</u> A		Stuart, FL 34997	
		<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	6526 S Kanner Hwy #253	
(		Stuart, FL 34997	
D. If amending the registered agent and/or reginew registered agent and/or the new register			the name of the
Name of New Registered Agent:	DANIEL	LE MCDONOUGH	
	6526 S K	anner Hwy #253	
New Registered Office Address	·	(Florida str	eet address)
	Stuart		Florida 34997
		(City)	(Zip Code)

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: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	PT John Do V Mike Jo SV Saily Si	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) <u>×</u> Change Add	PD	DANIELLE MCDONOUGH	6526 S Kanner Hwy #253 Stuart, FL 34997
Remove			
2) × Change Add	STD	ANDREA FOLDEN	6526 S Kanner Hwy #253 Stuart. FL 34997
Remove 3) × Change Add Remove	VD	MELINDA HEATH	6526 S Kanner Hwy #253 Stuart, FL 34997
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she	ng additional Ar tets, if necessary).	ticles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoptidate this document was signed.	on:	, if other tha	an the
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block do document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will no nent of State's records.	t be listed as th	he
Adoption of Amendment(s)	(CHECK ONE)		

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

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 10/20/2023					
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)					
DANIELLE MCDONOUGH					
(Typed or printed name of person signing)					
PRESIDENT, DIRECTOR					

(Title of person signing)