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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Pine Crest South As	sociation, Inc.			
DOCUMENT NUMBER:	761206				
The enclosed Articles of An	nendment and fee are sub	omitted for filing.			
Please return all correspond	ence concerning this mat	ter to the following:			
Bonita Hadwin					
		(Name of Contact Pe	rson)		
		(Firm/ Company	·)	····	
184 SW Crescent Street					
	·····	(Address)			<u> </u>
Lake City, FL 32025					
		(City/ State and Zip (Code)		-
bonitahadwin@gmail.com					
	-mail address: (to be use	d for future annual rep	ort notificati	on)	
For further information con-	cerning this matter, pleas	e call:			
Bonita Hadwin		at	386	752-0094	
	(Name of Contact Person		(Area Code	(Daytime Telepho	one Number)
Enclosed is a check for the	following amount made p	ayable to the Florida I	Department o	of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Cert s Cert (Add	50 Filing Fee ifficate of Status iffied Copy ditional Copy is losed)	
Mailing Amendme	Address ent Section		eet Address		

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

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

Articles of Amendment to Articles of Incorporation of

Pine Crest South Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 761206 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: Bonita Hadwin Name of New Registered Agent: 184 SW Crescent Street (Florida street address) New Registered Office Address: Lake City (City) 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

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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change Add	DP	Michael D. Allen	156 S.W. Crescent Street Lake City. FL 32025
x Remove			
2) Change Add	<u>DP</u>	Linda E. Tomlinson	146 S.W. Crescent Street Lake City, FL 32025
Remove 3)	Asst Pre	Caleb Martin	198 SW Crescent Street Lake City, FL 32025
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee) N/A		cles, enter change(s) here: (Be specific)	

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	7
The date of each amendment(s) ad-	option:, if other than the
date this document was signed.	, if other than to
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad-	antial by the members and the number of votes and for the court for the
was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).

	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 Signatur	Dated 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) Bonita Hadwin	_
	(Typed or printed name of person signing)	
	DT/DS	
	(Title of person signing)	