## G82588

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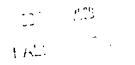


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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Century St. August	tine Properties, Inc.			
OOCUMENT NUM					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Dirk M. Schroeder				
		Name of Contact Person	1		
	Century St. Augustine Properties, Inc.				
		Firm/ Company	<del> </del>		
	2820 US Highway 1 South, S	Suite A			
		Address			
	Saint Augustine, Florida 32086-6352				
		City/ State and Zip Code	e		
	dirkschroeder@msn.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati Dirk M. Schroeder	on concerning this matter, pleas	se call:  at (	540-2360		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made		·		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Di P.G	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

Century St. Augustine Properties, Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
G82588	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	202
C. Enter new mailing address, if applicable:	,
(Mailing address MAY BE A POST OFFICE BOX)	
	ي
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	
(Florida st	reet address)
11 2 1 10 m 11	Madda
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  Signature of New K	E with and accept the obligations of the position.  Registered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e). F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VD	Tanya Liebel	6948 Cypress Springs Court
X Add			Saint Augustine, FL 32086-4818
Remove			
2) Change	<u></u>	<u> </u>	
Add			<del> </del>
Remove 3) Change	···		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

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rovisions for	implementing the a	mendment if no	t contained in t	he amendment i	itself:	
(if not app	licable, indicate N/A)					
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The date of each amendment(s) adoption:date this document was signed.	if other than th
September 1st, 2020	
Effective date if applicable: (no more than 90 days a	fter amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable sta document's effective date on the Department of State's records.	tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of action was not required.	directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	r of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vo must be separately provided for each voting group entitled to vote sep	
"The number of votes cast for the amendment(s) was/were suffic	ient for approval
by	<u></u> ."
(voting group)	
September 1st, 2020 Dated	
(By a director, president or other officer – if of selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
Dirk M. Schroeder	
(Typed or printed name of	person signing)
President	
(Title of person signing)	