(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
	J. HORNE	
	JUL 18 2022	2

Office Use Only



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2022 JUL 15 PM 3: 06

2022 JUL 15 AM 11: 14 FILED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 7/15/2022

PRIORITY Regular Approval

OUR REF # (Order ID#), 1054194

. ,

ORDER ENTITY

THE COMMONS AT ROYAL PALM BEACH PROPERTY OWNERS' ASSOCIATION, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:	ı
THE COMMONS AT ROYAL PALM BEACH PROPERTY OWNERS' ASSOCIATION, INC.	(FL)

File the attached amendment

ALOTPO.		 -	٠.		-	-	•				
NOTES:	-	 							,		

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, July 15, 2022 Page I of I

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	NS AT ROYAL PA	.LM ВЕАСН	PROPER'	TY OWNERS' ASSOCIATION, INC.
DOCUMENT NUMBER:			·	
The enclosed Articles of Amendment and fee ar	e submitted for fili	ing.		
Please return all correspondence concerning this	s matter to the follo	owing:		
John Blizzard				
	(Name of Co	ontact Person)	100
c/o DJK Capital Management LLC.				
-	(Firm/ C	Company)		
110 Washington Ave, #1315				
	(Ad	dress)		
Miami Beach, Florida 33139				
<u> </u>	(City/ State	and Zip Code	:)	
john@dsquaredventures.com				
E-mail address: (to b	e used for future ar	nnual report i	iotificatio	1)
For further information concerning this matter, p	please call:			
John Blizzard		603 at		387-8149
(Name of Contact P	Person)		ea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the	Florida Depa	rtment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St		Copy al copy is	Certif Certif	D Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Sect n of Corpo	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 JUL 15 AM 11: 14

THE COMMONS AT ROYAL PALM BEACH PROPERTY OWNERS' ASSOCIATION, INC.

SECRETARY OF STATE

(Name of Corporation as currently filed with the Florida	Dept. of State) IALL AHASSEE, FL
N01000006874	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	stes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora N/A	ttion:
name must be distinguishable and contain the word "corpord" "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:	c/o DJK Capital Management LLC
(Principal office address MUST BE A STREET ADDRESS	(£) 110 Washington Ave, #1315
	Miami Beach, Florida 33139
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	c/o DJK Capital Management LLC
	110 Washington Ave, #1315
	Miami Beach, Florida 33139
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent: n/a	
n/a	
New Registered Office Address:	(Florida street address)
n/a	Florida, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	
	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.

X	mple: Change Remove Add	PT John Doe V Mike Jones SV Sally Smith		
X		<u>Title</u> <u>Na</u>	am <u>e</u>	Address
Change SD Todd Roth 500 E. Las Olas Blvd., Unit 3504 X Add Ft. Lauderdale, Florida 33301 Remove 31 Change TD Kevin Seabolt 3225 N. Civic Center Plaza X Add Suite 6 Scottsdale, Arizona 85251 Change PD Carlos Segrera Add X Remove Store Maller Add Add Suite 6 Scottsdale, Arizona 85251 Change PD Eric Maller Store Maller Add X Remove Store Maller Store Maller Add Add Store Maller Store Maller Add Store Maller Store Maller Store Maller Add Store Maller Store Maller Add Store Maller Store Maller Store Maller Add Sto	Change X Add	<u>PD</u> <u>Joh</u>		/o DJK Capital Management LLC 10 Washington Ave, #1315
			odd Roth 5	00 E. Las Olas Blvd., Unit 3504
Add X Remove 5) Change	Remove Change X Add Remove	e : <u>TD Ke</u> e		Suite 6
5) Change	Change Add	<u>PD Ca</u>		
6) Change TD Raul Calado	Change Add	<u>VP</u> <u>Eri</u>	ńc Maller	
			aul Calado -	
X Remove E. If amending or adding additional Articles, enter change(s) here:			- s, enter change(s) here:	
(attach additional sheets, if necessary). (Be specific)	attach additional shee			
N/A				

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The date of each amendment(s) adoption:		if other than th
late this document was signed.		vangi muli ti
Effective date <u>if applicable</u> : n/a (no more than 90 days after a		
(no more than 90 days after a	mendment file date)	
Note: If the date inserted in this block does not meet the applicable state	utory filing requirements, this date wil	not be listed as the

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

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

Dated	July 7, 2022
Signature	John Blízzard
v	(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)
	John Blizzard
	(Typed or printed name of person signing)

(Title of person signing)