N04000011205

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TO: Amendment Section
Division of Corporations

e 1

NAME OF COL	RPORATION:	G HOMEOWNER'S ASSO ————	OCIATION, INC.			
DOCUMENT N	UMBER: N04000011205					
	icles of Amendment and fee are su	ibmitted for filing.				
Please return all	correspondence concerning this ma	atter to the following:				
	SHANNON L WIDMAN	SHANNON L WIDMAN				
	Name of Contact Person					
	PORATH & ASSOCIATES PA					
	Firm/ Company					
	PO BOX 2029					
		Address				
	SANTA ROSA BEACH, FL 32459					
		City/ State and Zip Cod	e			
	JACOB.WATKINS@CORCORANGROUP.COM					
	-	sed for future annual report	notification)			
	nation concerning this matter, plea					
SHANNON WIDMAN		at (
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fe	ce ☐\$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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EDEN'S LANDING HOMEOWNER'S ASSOCIATION, INC.

(<u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State)
N04000011205		
	(Document Number of	*Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new r	name of the corporation:	
	Corp," "Inc," or "Co". A	The new ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address	. if applicable:	4042 E CO HWY 30A UNIT C
(Principal office address MUST BE A STREET ADDRESS)		SANTA ROSA BEACH, FL 32459
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4042 E CO HWY 30A UNIT C
		SANTA ROSA BEACH, FL 32459
		1022
D. If amending the registered agent a new registered agent and/or the ne		
Name of New Registered Agent	SHANNON L WIDMAN	<u> </u>
	1732 W CO HWY 30A #10	06 ST 89
	(Florida stre	et address) 5
New Registered Office Address:	SANTA ROSA BEACH	
		(City) (Zip Code)
New Registered Agent's Signature, if a	changing Registered Agent:	ùth and accept the obligations of the position.
	thur &	Dix
	Signature of New Re	gistered 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)

Example:

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 Change <u>PT</u> John Doe \underline{X} Remove Mike Jones $\underline{\mathbf{V}}$ X Add <u>SV</u> Sally Smith Type of Action Title Address Name (Check One) 2409 CONSTANCE ST D MURRAY R ROSS 1) ____ Change NEW ORLEANS, LA 70130 ____ Add Х Remove TIMM SHORES PO BOX 145 2) ____ Change DESTIN, FL 32540 ____ Add Remove CORY CRAIG PO BOX 145 _ Change DESTIN, FL 32540 ___ Add Remove JACOB A WATKINS 4042 E CO HWY 30A #C D 4) ____ Change SANTA ROSA BEACH, FL 32459 _ Add ____ Remove PHILLIP POUNDSTONE 4042 E CO HWY 30A D 5) ____ Change SANTA ROSA BEACH, FL 32459 __ Add ___ Remove **EMILY WATKINS** 4042 E CO HWY 30A 6) ____ Change SANTA ROSA BEACH, FL 32459 Add __ Remove

amending or adding additional Arti- attach additional sheets, if necessary).	(Be specific)
,	
	
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	<u> </u>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate NA)	ndment if not contained in the amendment itself:
(if not applicable, maicale NA)	
·	
	

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The date of each amendment(s late this document was signed.	adoption: if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi locument's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dated	Dec 28, 2021
(By sele	director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	TIMM SHORES
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

. . . .