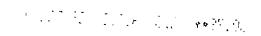
N05000000691

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORATION:	CH LANDINGS HOMI	EOWNERS AS	SOCIATION INC •	
N05000000691				
DOCUMENT NUMBER:		<u></u>		
The enclosed Articles of Amendment and fee are	e submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
MONICA FOLSOM				
	(Name of Contact	Person)		
PLANTATION BOOKKEEPING & PAYROLL	. SERVICES			
	(Firm/ Compa	ny)		
PO BOX 1264				
	(Address)		<u> </u>	
PERRY, FL 32348				
	(City/ State and Zi	p Code)		
MONICA@PLANTATIONBOOKKEEPING.C	ОМ			
E-mail address: (to be	used for future annual r	eport notification	on)	
For further information concerning this matter, p	lease call:			
MONICA FOLSOM	í		843-0259	
(Name of Contact Po	erson)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount ma	de payable to the Florida	a Department of	f State:	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta		Certi ris Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Address Amendment Section	-	treet Address	tion	
Division of Corporations		Division of Corporations		
P.O. Box 6327	T	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

KEATON BEACH LANDINGS HOMEOWNERS ASSOCIATION INC

Mary No (Name of Corporation as currently filed with the Florida Dept. of State) N05000000691 (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: 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent: (Florida street address) New Registered Office Address: . Florida (City) (Zip Code) 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	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>p</u>	THOMAS KICKLIGHTER	20360 KEATON BEACH DR PERRY, FL 32348
xxx Remove			
2) XXXX Change Add	PRES	JOHNNY JONES	97 SAND CREEK RD TIFTON, GA 31793
Remove	VP	BOB STEFFY	76119 CHARLTON DR KNOXVILLE, TN 37920
4) Change Add	BD MBI	LINDA CHURCHILL	1453 HARBOUR WALK RD TAMPA, FL 33602
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			,
			

	
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	_ _
The date of each amendment(s) adoption:	
07/02/2022	ther than th
Effective date if applicable: (no more than 90 days after amendment file date)	ther than th

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th document's effective date on the Department of State's records.

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.

Ö	There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
	Dated	07/22/2022
		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
		MONICA FOLSOM
		(Typed or printed name of person signing)
		TREASURER

(Title of person signing)