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THE STANSOFT FILES

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION: Summer House in	Old Ponte Vedra Condomin	nium Association
DOCUMENT N	NO5000007622	-	
The enclosed Art	icles of Amendment and fee are s	ubmitted for filing.	
Please return all o	correspondence concerning this ma	atter to the following:	
	Shannon Kolacz		•
		Name of Contact Person	1
	First Service Residential		
		Firm/ Company	
	700 Ocean Place		
		Address	
	Ponte Vedra Beach Fl 32082		
		City/ State and Zip Code	e
	shannon.kolacz@fsresidentia	al com	
	-	sed for future annual report	notification)
For further inform	nation concerning this matter, plea	ise call:	
Shannon Kolacz		904 at (285-4200
Na	ame of Contact Person		de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
🛢 \$35 Filing Fe	ee	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 Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	tiled with the Flori	da Dept. of State)	
105000007623			
(Document Number of	Corporation (if know	m)	
ursuant to the provisions of section 607.1006, Florida Statutes, this F s Articles of Incorporation:	Florida Profit Corpor	ation adopts the following	ig amendmenti
. If amending name, enter the new name of the corporation:			The new
ame must be distinguishable and contain the word "corporation," "co Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."			_ pn "Corp.,"
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/B		
		<u> </u>	2024
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		- C - C - C - C - C - C - C - C - C - C
		57. 	<i>.</i>
. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		the name of the	Ö
Name of New Registered Agent NA			-
(Florida stree	et address)		-
New Registered Office Address: W/#	Citv)	, Florida (Zip C	Coulai
, ,	Cnyy	(Zip C	.oue)

☐ 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	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Arlene Roy	700 Ocean Place
Add		-	Ponte Vedra Beach Fl 32082
X Remove			
2) Change	D	Garrett Warren	700 Ocean Place
X Add			Ponte Vedra Beach Fl 32082
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, revisions for implementing the amendment if not contained in the amendment itself:	tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
an amendment provides for an exchange, reclassification, or cancellation of issued shares, revisions for implementing the amendment if not contained in the amendment itself:	U/A	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, covisions for implementing the amendment if not contained in the amendment itself:	<i>972</i>	
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M/A	212 In 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ndment if not contained in the amendment itself:
<i>.</i>	(y not appricable, marcuse WA)	
	N/H	
	,	

	September 6, 2024	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
	mber 6, 2024	
Effective date if applicable:		····
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adoptaction was not required.	sted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
Board of Directors	in the amendment(s) was were surnerent to approve	
by		
	(voting group)	
September 6,	2024	
Dated		
Signature	Sout gallowy	
	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
appointe	d fiduciary by that fiduciary)	
J	ames Galloway	
-	(Typed or printed name of person signing)	···
P	resident	
_	(Title of person signing)	· ··-