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**TO:** Amendment Section Division of Corporations

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## NAME OF CORPORATION: \_\_ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT\_INC.\_

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The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SASHA L. EASTBURN, Esq.

(Name of Contact Person)

EASTBURN LAW FIRM, PA

(Firm/ Company)

5365 EAST COUNTY HWY 30A, SUITE 105 (Address)

SANTA ROSA BEACH, FL 32459

(City/ State and Zip Code)

at

### SASHA@EASTBURNLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SASHA L. EASTBURN, Esq.

(Name of Contact Person)

260-3332

(Area Code) (Davtime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

嶅 \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 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

Certificate of Status Certified Copy (Additional Copy is Enclosed) Street Address

□\$52.50 Filing Fee

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

850

#### Articles of Amendment to Articles of Incorporation of

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# ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC.

(Name of Corporation as currently filed with the Florid	a Dept. of State)		
N05000011774			
(Document Nur	nber of Corporation (if known	)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	autes, this <i>Florida Not For Pro</i>	fit Corporation adopts th	e following
A. If amending name, enter the new name of the corpor	ration:		
			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated" or	the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable:	<u>5365 E. COUNTY I</u>	<u>-1WY 30A, SUITE 10</u>	5
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SANTA ROSA BE</u>	ACH, FL 32459	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u> )	5365 EAST COUNT	Y HWY 30A, SUITE	105
	SANTA ROSA BE	EACH, FL 32459	202
			2021 JUi
D. If amending the registered agent and/or registered of	ffice address in Florida, ente	r the name of the	
new registered agent and/or the new registered office	e add <u>ress:</u>		2
<u>Name of New Registered Agent:</u> SAS	SHA L. EASTBURN, Esq.	<u> </u>	<u></u>
5365	5 EAST COUNTY HWY	30A, SUITE 105	9
<u>New Registered Office Address</u> :			
SAN	ITA ROSA BEACH,	, Florida 3245	9
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registere	ed 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)

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		<u>Doe</u> Jones Smith	
<u>Type of Action</u> (Check One)	<u>_Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>р</u>	RONALD F. TERRY, Sr.	235 SAN JUAN AVE Santa Rosa Beach, FL 32459
2) Change Add	VP	RITA BOTTEMS	235 SAN JUAN AVE Santa Rosa Beach, Fl
X Remove 3) Change Add X Remove	_ <u>S/T</u>	JOHN WITHERSPOON	32459 235 SAN JUAN AVE SANTA ROSA BEACH, FL 
4) Change X_ Add	_P/S	JOSEPH ALLEN	<u>33 BOWLINE ALY</u> <u>SANTA ROSA BEACH, FL 3</u> 2459
Remove 5/ Change Add	<u>VP/T</u>	CHRISTIAAN VOLKERT	80 BRENDA LANE INLET BEACH, FL 32461
د المحمد من			
Remove			

# E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary), (Be specific)

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The date of each amendment( date this document was signed.		, if other than the
Effective date <u>if applicable</u> :	MAY 24, 2021 (no more than 90 days after amendment file date)	

<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 the 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.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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Dated	5/24/21
Signature	Kole Stay Son
(	By the chairman or vice chairman of the board, president of 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)
	ROLAND F. TERRY, Sr.
	(Typed or printed name of person signing)

<u>PRESIDENT</u>

. . . . .

(Title of person signing)