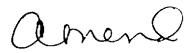
## NGC CCCC 3113

(Re	questor's Name)	)
——————————————————————————————————————	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	r)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



300378797953



01/04/22--01041--001 \*\*52.50

2022 JAN -4 PM 12 02

A RAMSEY JAN 2 7 2022

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	HOMEOWNERS ASSOCIATION, INC.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Kriston Nottingham	
	(Name of Contact Person)
Access Management	
	(Firm/ Company)
Amendment Section - Division of Corporations - P.O	). Box 6327
	(Address)
Celebration, FL 34747	
	(City/ State and Zip Code)
knottingham@accessdifference.com	
E-mail address: (to be used	I for future annual report notification)
For further information concerning this matter, please	call:
Kriston Nottingham	407 480-4200 at
(Name of Contact Person	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  □\$52.50 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 Street Address

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

## Articles of Amendment to Articles of Incorporation of

PMI2 02

SQUIRE'S GROVE HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N06000002112

N06000002112				
			ration (if know)	
Pursuant to the provisions of section 617,1006. Floridament(s) to its Articles of Incorporation:	a Statutes.	this <i>Flor</i>	rida Not For Pr	ofit Corporation adopts the following
A. If amending name, enter the new name of the co	orporatio	<u>n:</u>		
				The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation	าก" or "ii	ncorporated" o	r the abbreviation "Corp." or "Inc.
	ρ.	Access M	lanagement	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	DRESS )	215 Celel	bration Place Su	nite 115
	(	Celebratio	on, FL 34747	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>0X</u> )	Access N	Management	
(Mutting data ess Mills 1922)		215 Celel	bration Place St	nite 115
	•	Celebrat	tion, FL 34747	
D. If amending the registered agent and/or registr	ered office	e addres:	s in Florida, en	ter the name of the
new registered agent and/or the new registered	Access Ma		nt	
Name of New Registered Agent:				
2	215 Celeb	ration Pla	acc Suite 115	
-	<del>-</del>		(Floru	da street address)
New Registered Office Address:	T 11-1			32314
-	Tallahass			, Florida
		(City)		(24) (300)
New Registered Agent's Signature, if changing R. I hereby accept the appointment as registered agent.	, ram ji	A	1	e obligations of the position.  ed 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: XChange X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	STD	William Fife	215 Celebration Place Suite 115 Celebration, FL 34747
Remove			
2) Change Add	PD	Jennifer Bradbury Berrong	215 Celebration Place Suite 115 Celebration. FL 34747
Remove	VPD	Jennifer Nunns	215 Celebration Place Suite 115 Celebration, FL 34747
4) Change Add	S/T	Moulton, Mary	5322 Primrose Lake CircleSuite C Tampa, FL 33647
x Remove			
5) Change Add	<u>VP</u>	Dotson, Melissa	5322 Primrose Lake CircleSuite C Tampa, FL 33647
× Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		cles, enter change(s) here: (Be specific)	
			<u></u>

The date of each amendment(s) adoption: 12/7/2021
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: 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) ( <u>CHECK_ONE</u> )
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

•

15 . 1	12/21/2021
Dated	
Signati	Thorn Thorn
	(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)
	Jennifer Bradbury Berrong
	(Typed or printed name of person signing)
	President