## N07000004525

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## **COVER LETTER**

NAME OF CORPORATION: Heritage Landing Hammerheads N07000004525 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HLHammerheads @ amail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: David Diger
(Name of Contact Person) at  $\frac{773 - 150 - \omega 172}{\text{(Area Code)}}$  (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address

**TO:** Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Hertiage Landing Hammerheads, Inc.		•	
(Name of Corporation as currently filed with the I	Florida Dept. of State)		
N07000004525		-	
(Document	nt Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statut <del>e</del> s, this <i>Florida Not For Profit Corporation</i> :	adopts the fe	ollowing
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or the abbreviation	"Corp." or	- "Inc."
		<u>:-</u> -	24
B. Enter new principal office address, if applicable	le:	1967	SEP
(Principal office address MUST BE A STREET AD	1DKE33 )	<u> </u>	<u> </u>
			-20 -:-
		111	24 ED
C. Enter new mailing address, if applicable:		II)	
(Mailing address MAY BE A POST OFFICE B	<u>ox</u> )	<u>95</u>	
		D.F.	3 <b>2</b>
		<del></del> _	
D. If amending the registered agent and/or regist	ered office address in Florida, enter the name of th	<u>ie</u>	
new registered agent and/or the new registered	David Dyer		
Name of New Registered Agent:	370 Heritage Landing Parkway		
<u>-</u>			
New Registered Office Address:	(Florida street address)		
	Saint Augustine	32092	
• -		32092	<del></del>
	(City) (Zip	Code)	
New Registered Agent's Signature, if changing Re	egistered Agent:		
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the	position.	
	9)2001 R		
_	Simulation of Management Against 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 Y Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	Title	Name	Address
1) × Change Add	<u>P</u>	David Dyer	370 Heritage Landing Parkway Saint Augustine, FL 32092
x Remove			Katee Schalau
2) Change x Add	<u>T</u>	Christy Coffey	Saint Augustine, FL 32092
X   Remove	<u>s</u>	Jennifer Taylor	Stina Antonopoulos 370 Heritage Landing Parkway Saint Augustine, FL 32092 Nicole Rigdon
4) Change x Add	<u>VP</u>	Dianna Hansen	370 Heritage Landing Parkway Saith Augustine, FL 32092
x Remove			
5) <u>× Change</u> Add	Volunted	Danielle Simpson	Saint Augustine, FL 32092
Remove			
6) Change x Add	Equipme	Scott Wasilewski	370 Heritage Landing Parkway Saint Augustine, FL 32092
× Remove			Megan Mallicoat
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
	<del></del>		

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				<b></b>
The date of each amendment date this document was signed				, if other than the
Effective date if applicable:	08/22/2024			
	(no more than 9	00 days after amendmer	nt file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the a ne Department of State's rec	applicable statutory filir cords.	ng requirements, this dat	e will not be listed as the
Adoption of Amendment(s)	(CHECK ON	E)		

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	09/12/2024
Dated	
Signatur	(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)
	David Dyer
	(Typed or printed name of person signing)

(Title of person signing)