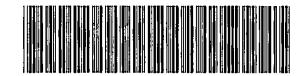
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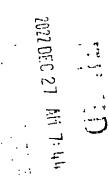
| | (Requestor's Name) |
|----------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UF | P WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | s to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: Cross Florida Greenway Equestrians | | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: <u>NO 700005506</u> | | | | |
| DOCUMENT NUMBER: NO TO | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Mariee McGinnis (Name of Contact Person) | | | | |
| (Name of Contact Person) | | | | |
| | | | | |
| (Firm/ Company) | | | | |
| 75 Lake View DR E | | | | |
| (Address) | | | | |
| Ocala, 34482 (City/State and Zip Code) | | | | |
| (City/ State and Zip Code) | | | | |
| greenway equestrians ocala (a amail. com E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| | | | | |
| Marilee McGinnis at 561-723-3615 (Name of Contact Person) (Area Code) (Daytime Telephone Number) | | | | |
| (Name of Contact Person) (Area Code) (Daytime Telephone Number) | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | |
| \$35 Filing Fee | | | | |
| Mailing Address Street Address | | | | |
| Amendment Section Amendment Section Division of Corporations Division of Corporations | | | | |
| P.O. Box 6327 The Centre of Tallahassee | | | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

والمراجع والمناسبين

| (Name of Corporation as currently filed with the Florid | | 2022 DEC 27 AM 7: 44 |
|--|---|--|
| Cross Florida Greenway | Equestrans | NO700005504 |
| (Document Nur | nber of Corporation (if know | /n) |
| Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation: | tutes, this Florida Not For P | rofit Corporation adopts the following |
| A. If amending name, enter the new name of the corpor | ration: | |
| name must be distinguishable and contain the word "corpo | mention" or "incorporated" o | The new |
| "Company" or "Co." may not be used in the name. | ration of incorporated o | withe down evidation. Corp. or The. |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES) | SS) | |
| | <u> </u> | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NA | |
| | | |
| | | |
| D. If amending the registered agent and/or registered o | | ter the name of the |
| new registered agent and/or the new registered offic | | 1 - |
| Name of New Registered Agent: | Susan Hop | ler and |
| | 3104 W. Hwy | 316, Reddick, FL 3268 |
| New Registered Office Address: | (г юна | a sireet aaaress) |
| | | Florida (Zip Code) |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am | | obligations of the position. |
| | Susan Hoyelon Signature of New Registere | |
| | Signature of New Registers | d 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 D V Mike J SV Sally S | <u>ones</u> | |
|---|---|---|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | <u>P</u> | Douglas C. Shearer | 2301 SE85th St Ocala, FL 34480 |
| Remove 2) Change Add | Ρ_ | Susan Hopler | 3104 W Hwy 316 Reddick, 32686 |
| Remove Change Add Remove | <u>vp</u> | Jesse Barnard | 104805E 32 500 Ocala, FL 34480 |
| 4) Change | <u>VP</u> | Michelle Shearer | 4062 SE 126HRP) Bellview, FL 34420 |
| Remove 5) Change Add | _5_ | LInda Austri | 1570 SE 90th St Ocklawah, FL 32179 |
| Remove 6) Change Add | | | |
| Remove E. If amending or addi (attach additional she | | ticles, enter change(s) here: (Be specific) | |
| · | NA | | |
| | | | |
| | | | |

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|---|
| |
| |
| June 22 7020 |
| The date of each amendment(s) adoption: June 22, 2022, if other than the |
| date this document was signed. |
| Effective data if applicables . This 22 2022 |
| Effective date if applicable: in e 12, 2022 (no more than 90 days after amendment file date) |
| (no more than 20 days after amenanera free 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. |

| 呕 | There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. |
|---|--|
| | Dated June 22, 2027 Signature Sum Hoplin |
| | |
| | (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) |
| | (Typed or printed name of person signing) |
| | (Typed or printed name of person signing) |
| | |
| | President |
| | (Title of person signing) |