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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		ED VOLUNTARY HOM	IEOWNER	S ORGANIZATI	ON INC	
DOCUMENT NUMBER:	N07260					
The enclosed Articles of Ar	mendment and fee are sub	mitted for filing.	••			
Please return all correspond	lence concerning this matte	er to the following:				
CRISTIANE GRITSCH						
	·	(Name of Contact Person	n)			
		(Firm/ Company)				
11401 NORTH BAYSHOR	RE DRIVE	(Firm Company)				
		(Address)				_
NORTH MIAMI, FLORID	A 33181					
		(City/ State and Zip Cod	e)	 -		
CRISALVAR@HOTMAII	COM				· -	202
	E-mail address: (to be used	for future annual report	notification	1)	•	202 1 JUL
For further information con	cerning this matter, please	call:			:	<u>=</u> 19
HAL RICHMAN		30: at		5101008		<u> </u>
	(Name of Contact Person) (Ar	rea Code)	(Daytime Telep	hone Nuir	iberi
Enclosed is a check for the	following amount made pa	ayable to the Florida Depa	artment of	State:	•-	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	Filing Fee cate of Status ed Copy tional Copy is sed)		

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

SANS SOUCI GATED VOLUNTARY HOMEOWNERS ORGANIZATION, INC

(Name of Corporation as currently filed with the Flo	orida Dept. of State)		—
N07260	, , , , , , , , , , , , , , , , , , ,		
(Document	Number of Corporation (if know	/n)	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For P	rofit Corporation adopts the follow	ving
A. If amending name, enter the new name of the col	rporation:		
SANS SOUCI VOLUNTARY GATED HOMEOWNE	ERS ORGANIZATION, INC	The i	new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" o		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	V)	202?	
(Mailing address MAT BE A POST OFFICE BO)	<u></u>		
			-
			, -
D. If amending the registered agent and/or registere	ed office address in Florida, en	ter the name of the	ር: <u>-</u>
new registered agent and/or the new registered of			. .
Name of New Registered Agent:			
N D :	(Floria	a street address)	
New Registered Office Address:			
		, Florida (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi		. His main and the managerium	
I hereby accept the appointment as registered agent. I	i am jamiliar with and accept the	obugations of the position,	
	Signature of New Registere	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 De V Mike Jo SV Sally Sr	ones en	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			····
E. If amending or addin (attach additional shee	g additional Arti ts, if necessary).	icles, enter change(s) here: (Be specific)	
PLEASE ADD TAX ID #	# 88- <u>3168586</u>		

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		<u> </u>
		<u> </u>
The date of each amendment(s) adoption date this document was signed.	on:	_, if other than the
Difference data if applicables		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be	pe listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	I by the members and the number of votes cast for the amendment(s)	

· 🗏	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 7/11/2022
	Signature / W. S. J. L. J.
	HAROLD RICHMAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)