N10000006272

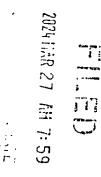
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	IANOR HOMEOWNE	RS ASSOCIA	ATION, INC.
DOCUMENT NUMBER: N10000006272			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
JENNIFER H. COPUS, ESQ.			
	(Name of Contact Per	rson)	
COPUS & COPUS, P.A.			
	(Firm/ Company)	
25 WALTER MARTIN ROAD NE. SUITE 200			
	(Address)		,,
FORT WALTON BEACH, FLORIDA 32548			
	(City/ State and Zip C	Zode)	
JENNIFER@COPUSLAW.COM			
E-mail address: (to be used	d for future annual rep	ort notification	1)
For further information concerning this matter, please	e call:		
JENNIFER H. COPUS, ESQ.	at	850	609-1433
(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida D	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing Address Amendment Section		eet Address endment Secti	ion
Division of Corporations		ision of Corne	

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, Ft. 32303

Articles of Amendment to Articles of Incorporation

BROWNSTONE MANOR HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 0000000272 N0000006272 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: . Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered 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)

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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add	D	_	MARY TUCKER	1325 COMMERCE DRIVE #1184 CRESTVIEW, FLORIDA 32536
X Remove				
2) Change Add		_		
Remove 3) Remove Add Remove		_		
4) Change Add		-		
Remove				
5) Change Add		-	**************************************	
Remove				
6) Change Add		_		
Remove				
E. If amending or additional sheet			icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not nent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

Dated	MARCH 7, 2024
Signature	Qd Ce
-	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 COMBS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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