## N15445

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SEGRETARY OF STATE
TALLAHASSEE, FL

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A. BUTLER
AUG - 4 2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Pipe	cerest Villas Corp Inc	
DOCUMENT NUMBER: N 154	, <u>45</u>	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Devon	(Name of Contact Person)	
	(Name of Contact Person)	
	(Firm/ Company)	
700 (0	Main St	
153	(Address)	
- ucvA	Park F 33825 (City/ State and Zip Code)	
	(City/ State and Zip Code)	
dpd@gee	devine, Net	
E-mail address: (to be used	d for future annual report notification)	
For further information concerning this matter, please	call:	
Casamba 9 layed	an Sle 3453 2335	
(Name of Contact Person	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:	
\$35 Filing Fee \$\Bar{\text{S43.75 Filing Fee & Certificate of Status}}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	with the state of	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED 2022 HAY 27 AM 6:

Name of Corporation as currently filed with the Flo	orida Dept. of State)	AH 6: 48
		SECRETHAY DE STATE
(Document	Number of Corporation (if known)	THE AMASSEE, FL
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Prof	it Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporution or "incorporated or t	ne abbreviation "Corp. or "Inc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		the name of the
Name of New Registered Agent:	702 11 11	-\., A
<u>New Registered Office Address:</u>	(Florida st	reet address)  Florida 33835 (Zip Code)
New Registered Agent's Signature, if changing Regi		, ,
I hereby accept the appointment as registered agent. I	am familiar with and accept the ob	ligations of the position.
	_bbux14 mlk.	
	Signature of New Registered A	gent, 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 hold. 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u> P</u>	Marty Layne	
Add Remove  2) Change Add	P	Frank Vann	1430 S Golfolew Dr Avon Pork F. 3388
Remove Change Add Remove		Zudy Pounds	
4) Change Add	_\_	Davino Chaffee	1420 S. Colfulew Dr Avon Paul Fr. 33335
Remove 5) Change Add	<u>S</u>	Karen Lamb	
Remove  6) Change Add	5	Lavisa Eakin	14425. Golfventr Avortant Freds
		onal Articles, enter change(s) here: essary). (Be specific)	•

•	
•	
The date of each amendment(s) adoption:, if other than	he
date this document was signed.	
Effective data if applicables	
(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) (CHECK ONE)	
$\Lambda$ /	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	

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 $5/10/2022$			
Signature  (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)			
FrenkVa			
(Title of person signing)			