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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: TROCC	T RIVER CI	lub, I	INC.	
DOCUMENT NUMBER: N 15460				
The enclosed Articles of Amendment and fee are su				
Please return all correspondence concerning this ma	tter to the following:			
Ahoyun Plan				
Martha R. Lee	(Name of Contact Pers	ion)	·—·	
TRUIT RIVER Club.				
,	(Firm/ Company)		- 	
9745 Lem Turner	Re			
JARKSONVIILE, 1-1	32208			
, , , , , , , , , , , , , , , , , , , ,	(City/ State and Zip Co	ode)		
RN Lee 925 @ be1/50u E-mail address: (to be us	th, Net	et motification		<u> </u>
		ii nomicano	11)	
For further information concerning this matter, please	se can.			
MARTIA R. Lee (Name of Contact Perso	at	904	874	9508
. (Name of Contact Perso	on) (a	Area Code)	(Daytime Telep	hone Number)
Enclosed is a check for the following amount made	payable to the Florida De	partment of	State:	
\$35 Filing Fee \$\square\$ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address		t Address	•	
Amendment Section Division of Corporations		ndment Section of Corpo		
P.O. Box 6327		Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 MAR -1 AM 11: 15

(Name of Corporation as currently filed with the Florida Dept. of State)	- SEC RETARY OF STATE- FALLAHASSET, FULL
TROUT River Club INC. (Document Number of Corporati	FALLAHASSEE, FULL
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation" or "incorporation" or "company" or "Co," may not be used in the name.	rporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: N/A	
(Principal office address MUST BE A STREET ADDRESS)	
 -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/4	
D. If amending the registered agent and/or registered office address in least registered agent and/or the new registered office address:	Florida, enter the name of the
$\overline{\tau}_{i}$	wa K
Name of New Registered Agent:	- O
<u>9745 Lem</u>	TURNER Rd
New Registered Office Address:	The same and the s
JACKSONYII	1e Florida 32208 (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent; hereby accept the appointment as registered agend I am familiar with ana	accept the obligations of the position.
Signatureal New	Registered agent, if changing
	r Registered Seem, y Enunging

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	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) X Change Add	<u> P</u>	John Parek	9745 Lem TURNER Rel SAUKSONVITE = 1 32228
Remove 2) X Change Add		Robert Carlson	1-teather Heers 9745 LED THANK Rd. Jacksomik Fl 3:208
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove			
	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	

The date of each amendment(s) adoption: 2/25/2022
Effective date if unplicable: 2/25/3622
Effective date if applicable: $\frac{\partial}{\partial S} = \frac{\partial S}{\partial S}$ (no mbre 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)
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

X
<i>,</i> ,

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 2/35/2002
Signature Dartha K. Sec
(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)
MARTHA R. LCC
(Typed or printed name of person signing)
TREUSURER
(Title of person signing)