N16 000 003 432

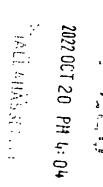
	questor's Name)	
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	#)
•	•	•
PICK-UP	☐ WAIT	MAIL
	_	
(Bu:	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates of	of Status
-	-	
Special Instructions to I	Filing Officer:	

Office Use Only



900396239639

10/25/22--01010--015 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Braemore Part	k Condominiums A	Association	n, Inc.
DOCUMENT NUMBER:	N160800034	32	
The enclosed Articles of Amendment and fee are sul	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Kathy Carlson			
	(Name of Contact Per	son)	
My HOA Services, LLC			
	(Firm/ Company)		
1615 Village Square Blvd, Suite 3			
	(Address)		
Tallahassee, FL 32309			
-	(City/ State and Zip C	ode)	
MyHOAServices@gmail.com			
E-mail address: (to be use	d for future annual repo	rt notificatio	n)
For further information concerning this matter, pleas	e call:		
Kathy Carlson	at	850-22	2-9730
(Name of Contact Perso	n) (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida D	epartment of	State:
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address		et Address	
Amendment Section Division of Corporations		endment Sect sion of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED 2022 OCT 20 PH 4: 04

Braemore Park Condominiums Association, Inc.

(Name of Corporation as currently filed with the Fl	orida Dept. of State)	ALLAHASSEE.FL
N16000003432		75 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
(Document	Number of Corporation (if known	own)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit 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.	orporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicables (Principal office address MUST BE A STREET ADD	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>\(\frac{1}{2}\)</u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		he obligations of the position.
 -	Signature of New Register	red 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 Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change Add	<u>P,D</u>	Mia McKown	1223 Braemore Way Tallahassee, FL 32309
X Remove 2) Change X Add	P,D	Richard Paul Mitchell	1171 Braemore Way Tallahassee, FL 32309
Remove 3) Remove 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).	cles, enter change(s) here: (Be specific)	
	· · · · · · · · · · · · · · · · · · ·		

		
		
		
		<u> </u>
		
The date of each amendment(s) adoption:	October 11, 2022	_, if other than the
date this document was signed.		
Encerve date <u>it applicable</u> .	r 11, 2022	
	o more than 90 days after amendment file date)	
No. 100 Late and the late of		P . 1 .1

<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.

There are no mem adopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	10/11/2022
Signature	Kathlean Carlow
1	(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)
	Kathleen A Carlson
	(Typed or printed name of person signing)
	Registered Agent and Authorized Representative
	(Title of person signing)

2022 OCT 20 PM 4: 04