

8/19/2021

N1800002814

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : MOORHEAD REAL ESTATE LAW GROUP
Account Number : I19990000132
Phone : (850)202-8522
Fax Number : (850)477-0982

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: secretary@thefma.online

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
FREEPORT MERCHANTS ASSOCIATION INC.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 06 |
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FREEPORT MERCHANTS ASSOCIATION INC.

DOCUMENT NUMBER: N18000002814

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amelia H. Beard

(Name of Contact Person)

Moorhead Law Group

(Firm/ Company)

6757 US Highway 98, Ste 102

(Address)

Santa Rosa Beach, FL 32459

(City/ State and Zip Code)

secretary@thefma.online

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amelia H. Beard

850

608-0112

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|---|--|---|--|

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

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Articles of Amendment
to
Articles of Incorporation
of

FREEPORT MERCHANTS ASSOCIATION INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N18000002814

(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:

The new

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)**

16400 US HWY 331 S

SUITE B2 #280

Freeport, FL 32439

C. Enter new mailing address, if applicable:**(Mailing address MAY BE A POST OFFICE BOX)**

16400 US HWY 331 S

SUITE B2 #280

FREEPORT, FL 32439

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: Amelia H. Beard

6757 US Highway 98, Ste 102


*(Florida street address)*New Registered Office Address:

Santa Rosa Beach

(City)

Florida 32459

*(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

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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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|------------------------|---|
| 1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove | <u>P</u> | <u>Chase Barfield</u> | <u>16400 US 331S, STE B2 #280</u> <u>FREEPORT, FL 32439</u> |
| 2) <input checked="" type="checkbox"/> Change ___ Add ___ Remove | <u>V</u> | <u>Jennifer Laird</u> | <u>16400 US 331 S, SUITE B2 #280</u> <u>Freeport, FL 32439</u> |
| 3) ___ Change ___ Add <input checked="" type="checkbox"/> Remove | <u>S</u> | <u>Jeff Weller</u> | <u>16400 US 331 S, Suite B2 #280</u> <u>Freeport, FL 32439</u> |
| 4) ___ Change <input checked="" type="checkbox"/> Add ___ Remove | <u>S</u> | <u>Aaron Ellis</u> | <u>16400 US 331S, STE B2 #280</u> <u>FREEPORT, FL 32439</u> |
| 5) ___ Change <input checked="" type="checkbox"/> Add ___ Remove | <u>D</u> | <u>Betsy Steinbaum</u> | <u>16400 US 331 S, STE B2 #280</u> <u>FREEPORT, FL 32439</u> |
| 6) ___ Change ___ Add ___ Remove | ___ | ___ | ___ |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: 08/19/2021, if other than the date this document was signed.

Effective date if applicable: 08/19/2021
(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)

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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- ☒ 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 8-19-21

Signature Chase Barfield

(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)

Chase Barfield

(Typed or printed name of person signing)

President

(Title of person signing)

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