N18000007161

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

HERON BAYOU HOMEOWNERS' ASSOCIATION INC NAME OF CORPORATION:
N18000007161 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jasan Thibodeava (Name of Contact Person)
(Name of Contact Person)
Heron Baya HOA (Firm/Company)
(Firm Company)
38 S BLUE ANGEL PKWY #301
(Address)
PENSACOLA FL 32506
(City/ State and Zip Code)
HERONBAYOU.HOA@GMAIL.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SCISCY This DO LOCAL at SSO 384-6188 (Area Code) (Daytime Telephone Number)
(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:
☐ S35 Filing Fee ☐ S43.75 Filing Fee & ☐ S43.75 Filing Fee & ☐ Certificate of Status Certificate of Status (Additional copy is enclosed) ☐ S52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Finclosed)

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

Articles of Amendment to Articles of Incorporation of

HERON BAYOU HOMEOWNERS' ASSOCIATION INC.

(Name of Corporation as currently filed with the F	Florida Dept. of State)
N18000007161	
(Documen	nt Number of Corporation (if known)
amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:
	The new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	'corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>OX</u> ;
D. If amending the registered agent and/or registered new registered agent and/or the new registered	7
Name of New Registered Agent:	Jasan Ih, bodon
<u>New Registered Office Address</u> :	Pen Sa (0) A , Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Reg	•
	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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>p</u>	PAUL KUDRICK	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32596
* Remove			
2) Change Add	<u>v</u>	LAURY KOONTZ	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
X	<u>S</u>	COURTNEY WENZARA	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
4) Change Add	<u>D</u>	RYAN KOONTZ	38 S. BLUE ANGEL PKWY #301 7 PENSACOLA FL 32506
Kemove			
51 Change Add	<u>D</u>	SUSAN CARTER	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
<u>×</u> Remove			
6) Change Add	D	DALE BOYD	38 S. BLUE ANGEL PKWY #301 EPENSACOLA FL 32506
X Remove			
E. If amending or additional sheet			tinued on next PAGE)
			
			

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.

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Example: X Change X Remove X Add	$\overline{\underline{V}}$ Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<u>P</u>	TODD LARSON	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
Remove 2) Change × Add	<u>V</u>	PHIL VALESTIN	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
Remove 3) Remove × Add Remove	<u>s</u>	JASON THIBODEAUX	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
4) Change x Add	D	HATTIE LEARY	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
Remove 5	D	JOHN CARTER	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
Remove 6) Change × Add	D	DAVID COOK	38 S. BLUE ANGEL PKWY #301 PENSACOLA FL 32506
E. If amending or add (attach additional sh		Articles, enter change(s) here: 9. (Be specific)	

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		<u>:</u>
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	11 20 0022	
The date of each amendment(s) adoption:date this document was signed. Effective date if applicable:	11-30- 10-3	, if other than the
Effective date if applicable:	12-15-2023	
	han 90 days after amendment file date) the applicable statutory filing requirements, this day	to will not be listed as the
Note: If the date inserted in this block does not meet document's effective date on the Department of State		te will not be fisted as the
Adoption of Amendment(s) (CHECK	<u>(ONE)</u>	

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
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)
Jason Thipodaire
(Typed or printed name of person signing)
Heron Bayon HOA Section
(Title of person signing)