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## COVER LETTER

TO: Amendment Section Division of Corporations

SANTA ROSA NAME OF CORPORATION:	A RETREAT OWNERS ASSOCIATION, INC.
N18000008754 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Justin Brooks	
	(Name of Contact Person)
Santa Rosa Retreat Owners Association, Inc.	
	(Firm/ Company)
51 Carefree Lane	
	(Address)
Sunta Rosa Beach, Florida 32459	
	(City/ State and Zip Code)
brooks.justin@gmail.com	
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter,	please call:
Susan Pando	770 853-7628
(Name of Contact I	
Enclosed is a check for the following amount in	nade payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of S	The state of the s
<u>Mailing Address</u> Amendment Section	Street Address Amendment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

	Articles of Amendm		100 SER 7
	Articles of Incorpora of	ation	63
SANTA ROSA RETREAT OWNERS ASSOCIATIO	ON, INC.		`
Name of Corporation as currently filed with the F	lorida Dept. of State)	)	·
N18000008754			
(Documen	t Number of Corporat	tion (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida</i>	a Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the co	orporation:		
			_The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "inco	orporated" or the abbreviation "Corp." (	or "Inc."
B. Enter new principal office address, if applicable	51 Carefree I	Lane	
(Principal office address <u>MUST BE A STREET ADI</u>		Beach	
	Florida 32459	9	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	51 Carefree	Lane	
	Santa Rosa B	Beach	
	Florida 3245	59	-
N 16dim shamilton daman addam sociation	and office address in	Davida antay the name of the	
<ul> <li>If amending the registered agent and/or registenew registered agent and/or the new registered</li> </ul>		riorida, enter the hame of the	
Name of New Registered Agent: h	istin Brooks		
	Carefree Lane	· · · · ·	
_		(Florida street address)	
New Registered Office Address:	D. Dt	22.450	
	anta Rosa Beach	, Florida 32459 (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		d accept the obligations of the position	
weeep in approximent as regiment augent.	1.0 ~		
	UBrah-		
	Signature of Ne	w 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: X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally St	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>PI)</u>	Mike Hewitt	12671 Emerald Coast Pkwv Ste 209 Miramar Beach, FL 32550
2) Change Add	STD	Kelly S Lewis	12671 Emerald Coast Pkwy Ste 209 Miramar Beach, FL 32550
Remove Change Add Remove	<u>VPD</u>	Norman McLean	543 Driftwood Point Rd. Santa Rosa Beach, FL 32459
4) Change Add	PD	Justin Brooks	51 Carefree Lane Santa Rosa Beach, FL 32459
Change Add	VPD	Michele Brvan	24 Carefree Lane Santa Rosa Beach, Ft. 32459
Change Add	STD	Susan Pando	32 Carefree Lane Santa Rosa Beach, FL 32459
E. If amending or adding (attach additional shee		cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption:	if other than the
Effective date if applicable: Sylanber 1 2021  (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	listed as the
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.	

Dated	Septenber 1, 2021
Signatur	: Sko
	(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)
	Susan Pando
	(Typed or printed name of person signing)

(Title of person signing)