N19000010685

(Requestor's Name)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations

JENNINGS PLACE OWNERS AS NAME OF CORPORATION:	
N19000010685 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filin	
Please return all correspondence concerning this matter to the follow	
CARLA WATERS	
(Name of Co	ntact Person)
FORESTAR GROUP	
(Firm/ Co	ompany)
24190 US Highway 98, Suite D	
(Add	ress)
Fairhope, AL 36532	
(City/ State at	nd Zip Code)
CarlaWaters@forestar.com	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter, please call:	
Carla Waters	(251) 243-2782
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the F	Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Fili	Copy Certificate of Status
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

JENNINGS PLACE OWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dep	t. of State)
N19000010685	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, tamendment(s) to its Articles of Incorporation:	his Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>.</u>
	The new
name must be distinguishable and contain the word "corporation "Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	~ ·
_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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	i.
_	
D. If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office addr	ess:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	. Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accept the appointment as registered agent. I am familio	ir with and accept the obligations of the position.
Signa	ture 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: X Change X Remove X Add	PT John De V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	STD	Tucker Dorsey	25366 Profit Drive Daphne, AL 36526
 X Remove 2) X Change Add 	STD	Mary Moulton	4042 Park Oaks Blvd., Suite 200 Tampa, FL 33610
Remove	PD	Carla Waters	24190 US 98, Suite D Fairhope, AL 36532
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			
		cles, enter change(s) here: (Be specific)	

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date this document was signed.	n:	, it other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	es not meet the applicable statutory filing requirements, this date will not b	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

Cala Water
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)
Carla Waters
(Typed or printed name of person signing)
President