N19000010685

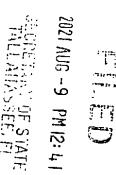
| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

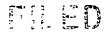
| JENNIN NAME OF CORPORATION: | GS PLACE OWNERS | ASSOCIATION, INC | |
|---|----------------------------|---------------------------------------|--|
| N1900001068 | | | |
| DOCUMENT NUMBER: | | | - |
| The enclosed Articles of Amendment and | fee are submitted for fi | ling. | |
| Please return all correspondence concernit | ng this matter to the foll | lowing: | |
| Cat Holladay | | | |
| | (Name of C | Contact Person) | |
| Forestar Group | | | |
| | (Firm/ | Company) | · · · · · · · · · · · · · · · · · · · |
| 24190 US Highway 98, Suite D | | | |
| | (A) | ddress) | |
| Fairhope, Al. 36532 | | | |
| ****** | (City/ State | and Zip Code) | |
| catholladay@forestar.com | | | |
| E-mail address: | (to be used for future a | innual report notificati | on) |
| For further information concerning this ma | atter, please call: | | |
| Cat Holladay | | 251 at | 243-2782 |
| (Name of Cor | itact Person) | | (Daytime Telephone Number) |
| Enclosed is a check for the following amo | unt made payable to the | e Florida Department c | of State: |
| ■ \$35 Filing Fee □\$43,75 Fil Certificate | | Copy Cert nal copy is Cert (Add | 50 Filing Fee ificate of Status ified Copy ditional Copy is losed) |
| Mailing Address | | Street Address Amendment Se | |
| Amendment Section Division of Corporation | S | Amenament Se Division of Cor | |

The Centre of Tallahassee

Tallahassee, Fl. 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of



JENNINGS PLACE OWNERS ASSOCIATION, INC.

2021 AUG -9 PM 12: 41

| (Name of Corporation as currently filed with the | Florida Dept. of State) | |
|--|---|--|
| N19000010685 | | SEGRETARY OF STATE |
| (Docume | ent Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 617,1006, Flori amendment(s) to its Articles of Incorporation: | da Statutes, this <i>Florida Not Fe</i> | or Profit Corporation adopts the following |
| A. If amending name, enter the new name of the | corporation: | |
| | | The new |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the name. | "corporation" or "incorporated | d" or the abbreviation "Corp," or "Inc," |
| B. Enter new principal office address, if applicab | | |
| (Principal office address <u>MUST BE A STREET AI</u> | <u></u> | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | <u>(0X</u>) | |
| | | |
| | | |
| to the state of th | | |
| D. If amending the registered agent and/or regist new registered agent and/or the new registere | | , enter the name of the |
| Name of New Registered Agent: | | |
| | | |
| - New Registered Office Address: | Œ | lorida street address) |
| New negisierea (MRC Maacs). | | |
| - | (City) | , Florida (Zip Code) |
| | (c iù) | (7.1g) Code) |
| New Registered Agent's Signature, if changing R. I hereby accept the appointment as registered agent. | | the obligations of the position. |
| | | |
| | Signature of New Regist | vered 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 | ones . | |
|--|--|--|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | <u>PD</u> | CARLA WATERS | 24190 US 98, STE. D FAIRHOPE, AL 36532 |
| × Remove | | | |
| 2) Change Add | PD | CATHERINE HOLLADAY | 24190 US 98, STE. D FAIRHOPE, AL 36532 |
| Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | cles, enter change(s) here: (Be specific) | |
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| The date of each amendment(s) adoption: date this document was signed. | | , if other than the |
| Effective date if applicable: | | |
| (m | o more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does is document's effective date on the Department | not meet the applicable statutory filing requirements, this date will not be of State's records. | e listed as the |
| Adoption of Amendment(s) (9 | CHECK ONE) | |
| The amendment(s) was/were adopted by was/were sufficient for approval. | the members and the number of votes cast for the amendment(s) | |

| | 13, 2021 |
|-----------|--|
| Dated | |
| Signature | the state of the s |
| have no | chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator — if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary) |
| Other c | ourt appointed figureary by that fiduciary) |
| | herine Holladay |
| | |
| Catl | herine Holladay |