## N20000004050

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## COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	TATES OWNERS ASS	OCIATION,	INC.
N2000004050 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
CARLA WATERS			
· · · · · · · · · · · · · · · · · · ·	(Name of Contact Per	son)	<u> </u>
FORESTAR GROUP			
	(Firm/ Company)		
24190 US Highway 98, Suite D			
	(Address)		
Fairhope, AL 36532			
	(City/ State and Zip C	ode)	
CarlaWaters@forestar.com			
E-mail address: (to be use	d for future annual repo	ort notification	1)
For further information concerning this matter, pleas	e call:		
Carla Waters		(251)	243-2782
(Name of Contact Perso	n)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida D	epartment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing Address  Amendment Section  Division of Corporations	Amo	et Address endment Secti sion of Corpo	

FE3 1 1 7521

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

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FOREST BAY ESTATES OWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida D	Dept. of State)
N20000004050	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the followin
A. If amending name, enter the new name of the corporati	ion:
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	) r -
	-
C. Enter new mailing address, if applicable:	J
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
Sig	gnature 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	ones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u>	Tucker Dorsev	25366 Profit Drive Dapline, AL 36526
<ul> <li>× Remove</li> <li>2) × Change</li> <li>Add</li> </ul>	<u>STD</u>	Mary Moulton	4042 Park Oaks Blvd., Suite 200 Tampa, FL 33610
Remove 3 ) Remove × Add Remove	<u>PD</u>	Carla Waters	24190 US 98, Suite D Fairhope, AL 36532
4) Change Add	<u>VPD</u>	Dina Brown	17745 Ashley Drive Panama City Beach, FL 32413
Remove  5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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		<del></del>
		<del></del>
		20 at a discount
The date of each amendment(s) adoption	: <u>.                                    </u>	If other than the
date this document was signed.		
Effective data if annitionally		
Effective date if applicable:	(no more than 90 days after amendment file date)	
(	no more man 20 days after amenament fite date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amondment of the strong adores of	by the mambers and the number of vates over for the amountments	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Signature Carla Waters  (By the chairman or vice chairman of the board, president or other officer-if director.)	David	December 8, 2020
(By the chairman or vice chairman of the board, president or other officer-if director 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)	Dated	
(By the chairman or vice chairman of the board, president or other officer-if director 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)	Signature	Calu Waters
(Typed or printed name of person signing)	•	(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
President		
riestaent		(Typed or printed name of person signing)
(Title of person signing)		