## N2000000 4050

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## COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: FOREST BA	Y ESTATES OWNERS	ASSOCIATION	, INC.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning th	nis matter to the following	<b>;</b> :	
Cat Holladay			
	(Name of Contac	t Person)	
Forestar Group			
	(Firm/ Comp	any)	
24190 US Highway 98, Suite D			
	(Address)	)	
Fairhope, AL 36532			
	(City/ State and Z	ip Code)	
catholladay@forestar.com			
E-mail address: (to	be used for future annual	report notificatio	n)
For further information concerning this matter,	please call:		
Cat Holladay		251 at	243-2782
(Name of Contact	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Floric	la Department of	State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S	cee & C\$43.75 Filing For tatus Certified Copy (Additional copy enclosed)	Certif y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Sect Division of Corpo The Centre of T	prations

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 Dept. of State) N20000004050 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

This I the Late

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, Sully 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	<u>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	PD	CARLA WATERS	24190 US 98, STE. D FAIRHOPE, AL 36532
x 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			
Rentove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet	g addition s, if neces	nal Articles, enter change(s) here: sary). (Be specific)	
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The date of each amendment(s) ac date this document was signed.	loption:		<del>-</del>	, if other than the
-				
Effective date <u>if applicable</u> :	(no more than 90 days af			
	(no more than 90 days af	ier amendment file date)	<del></del>	
Note: If the date inscrted in this blo document's effective date on the De	ck does not meet the applicable partment of State's records.	statutory filing requirement	nts, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the	number of votes cast for th	e amendment(s)	

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豆	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.			
	August 3, 2021 Dated			
	Signature Colonia Signature			
	(By the chairman of 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)			
	Catherine Holladay			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			