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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	OSCEOLA VILLAG	E HOMEOWNE	RS' ASSO	OCIATIO	ON, INC.
NOCUMENT NUMBER:	21000013085				
The enclosed Articles of Amenda	nent and fee are subm	nitted for filing.			
Please return all correspondence	concerning this matter	r to the following	:		
Richard A Browning					
		Name of Contact	Person)		
Stanley Martin Homes					
		(Firm/ Comp	any)		
28 East Washington Street					
		(Address))		
Orlando, FL 32801					
	(City/ State and Z	ip Code)		
BrowningRA@stanleymartin.com	m				
E-mai	l address: (to be used	for future annual	report no	tification)
For further information concerning	ng this matter, please o	call:			
Richard A Browning			321 at		698-7211
(Nan	ne of Contact Person)			(Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	ving amount made pay	yable to the Florid	da Depart	ment of S	State:
■ \$35 Filing Fee □\$	43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	cate of Status ed Copy ional Copy is
Mailing Address Amendment Se Division of Cor P.O. Box 6327	rporations		Street Ac Amendm Division The Cen	ent Section of Corpo	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

OSCEOLA VILLAGE HOMEOWNERS' ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) (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

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 Ju SV Sally Si	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	PD	James R Reinert	
A Remove			
2) Change Add	<u>PD</u>	Richard A Browning	28 East Washington Street Orlando, FL 32801
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	g additional Arti	cles, enter change(s) here: (Be specific)	
12 1			

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The date of each amendment(s) adoption date this document was signed.	n:	_, if other than the
10/12/2023		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated	10/12/2022
Signature	2
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator $\frac{1}{2}$ if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) John F Ogden (Typed or printed name of person signing) Vice President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.