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TO: Amendment Section Division of Corporations

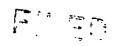
Tallahassee, FL 32314

NAME OF CORPORATION:	TRACE HOMEOWNERS AS	SSOCIATION	I, INC.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee			
Please return all correspondence concerning th	is matter to the following:		
Richard A Browning			
	(Name of Contact Pe	rson)	
Stanley Martin Homes			
	(Firm/ Company	·)	
28 East Washington Street			
	(Address)		
Orlando, FL 32801			
	(City/ State and Zip (Code)	
BrowningRA@stanleymartin.com			
E-mail address: (to	be used for future annual rep	ort notificatio	n)
For further information concerning this matter.	, please call:		
Richard A Browning	21	321	698-7211
(Name of Contact	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount r	nade payable to the Florida I	Department of	State:
■ \$35 Filing Fee		Certif Certif	icate of Status ied Copy tional Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address nendment Sect vision of Corpo e Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation



SIMMONS TRACE HOMEOWNERS ASSOCIATION, INC. 2022 DCT 18 PH 2: LS

Name of Corporation as currently filed with the Florid	da Dept. of State)	
N210001	014364	(TO 777 777 77 STATE
	umber of Corporation (if kno	own)
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
ame must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	oration" or "incorporated"	or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flor	ida street address)
		, Florida
	(City)	(Zip Code)

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 Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	PD	Jim Reinert	
A Remove			
2) Change Add	PD	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)	
			·

	· · · · · · · · · · · · · · · · · · ·	
		
		
		
The data of each amondment	(s) adoption:	if athan than the
date this document was signed.		, it other than the
	10/12/2022	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for the amendment(proval.	s)

Dated	10/12/2022	
Signature		
	have not been selected,	chairman of the board, president or other officer-if directors by an incorporator — if in the hands of a receiver, trustee, or duciary by that fiduciary)
	John 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.