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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

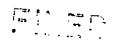
Tallahassee, FL 32314

WINDS NAME OF CORPORATION:	SOR RESERVE COM	4MUNITY A	SSOCIATION	N, INC.
N2200000 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and				
Please return all correspondence concern	ing this matter to the	following:		
Richard A Browning				
	(Name	of Contact Pe	rson)	
Stanley Martin Homes				
	(Fi	rm/ Company	)	· · ·
28 East Washington Street				
		(Address)		
Orlando, FL 32801				
	(City/ S	tate and Zip (	Code)	
BrowningRA@stanleymartin.com				
E-mail addres	s: (to be used for futt	ire annual rep	ort notification	n)
For further information concerning this n	natter, please call:			
Richard A Browning		at	321	698-7211
(Name of Co	ontact Person)	ut .	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable to	the Florida I	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certifica	te of Status Certii	fied Copy itional copy is	Certif Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327	ns	Am Div	eet Address lendment Sect rision of Corpo e Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation



WINDSOR RESERVE COMMUNITY ASSOCIATION, INC. 2022 007 18 PM 1: 09

Name of Corporation as currently filed with the Flo	orida Dept. of State)	C=00=	
Nazo	00003073	SECRETIC	Y 07 073-7
(Document	Number of Corporation (if known	)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Pro	fit Corporation adopts	the following
A. If amending name, enter the new name of the co-	rporation:		
	. "	1 11 12 12	The new
name must be distinguishable and contain the word "co " <mark>Company" or "Co." may not be used in the name</mark> .	огроганов от іпсогроганей от і	me anoreviation Cor <sub>l</sub>	p. or inc.
B. Enter new principal office address, if applicable:			
Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
). If amending the registered agent and/or registere	ad office address in Florida, anta	r the name of the	
new registered agent and/or the new registered o		the name of the	
Name of New Registered Agent:			
	(Florida s	treet address)	
New Registered Office Address:			
_		Florida	<del></del>
	(City)	(Zip Code)	,
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent. I		bligations of the positi	on.
	Signature of New Registered 2		

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 <math>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	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	PD	Jim Reinert	
A Remove  2) Change Add	PD	Richard A Browning	28 East Washington Street
Add  Remove  Change Add Remove			Orlando, FL 32801
4) Change Add			
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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The date of each amendment(s) adoption: date this document was signed.	<u> </u>	, if other than the
Effective date if applicable: 10/12/2022		
	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does to 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)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

	10/12/2022
Dated	
Signature	3
_	(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 fitting ary)
	other court appointed inductary by inductionary)
	John Ogden
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)
	(Title of person signing)
	r. I
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