N22000003663

(Requ	estor's Name)	<u> </u>
(Addre	ess)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

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FILED 10.402/24--01002--004 ANSSEE, FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Legacy Golf Club	o, Inc.	
DOCUMENT NUMBER: N22000003663		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Melissa M. Smith		
	(Name of Contact Person)	
Cherry, Edgar & Smith, P.A.		s co
	(Firm/ Company)	ECRL
8409 North Military Trail, Suite 123	Ţ	
·	(Address)	CRETARY OF STA
Palm Beach Gardens, FL 33410	(City/ State and Zip Code)	TA CE
	sed for future annual report notification)	· ਜੋ
For further information concerning this matter, plea	ase call:	
Melissa Smith	at_561 471-7767	
(Name of Contact Pers	on) (Area Code) (Daytime Telephone Num	iber)
Enclosed is a check for the following amount made	payable to the Florida Department of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Legacy Goff Club, Inc.		<u> </u>
Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N22000003663		
(Document N	lumber of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Sumendment(s) to its Articles of Incorporation:	tatutes, this Florida Not F	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
N/A		The nev
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDR.	ESS)	
		- <u>-</u>
C. P.A., and mailing address if applicables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>
· · · · · · · · · · · · · · · · · · ·		ASS
 If amending the registered agent and/or registered 	l office address in Florid	a, enter the name of the
new registered agent and/or the new registered off		<u> </u>
Name of New Registered Agent:	N/A	
Mane of Hen Hogisterea Igen.		
		Florida street address)
New Registered Office 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change Add		IV/A	SECRET	
Remove				
2) Change Add			SSC TO	
Remove 3) Change Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or additional sheet		onal Articles, enter change(s) here: essary). (Be specific)		
Article IX of the Articles	of Incor	poration is hereby amended and restated to provide a	s follows:	
In the event of dissolution or final liquidation of the Corporation after payment of its debts, all of the				
property and assets of	the Corp	oration shall be distributed among its voting membe	rs in proportion to the	
value of their member	ships.			

was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
Dated 9/29/24		
Signature (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)		
LYDIA M ANDERSON		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)		

2024 OCT -2 PM 1: 39
SECRETARY OF STATE
TALLAHASSEE, FL