N22000012323

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CORPORATE ACCESS, _

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INC. 1

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| | CERTIFIED COPY | |
|----|--|----------------------------------|
| XX | РНОТОСОРУ | |
| | GS | |
| XX | FILING | INC AMEND |
| _ | PALM RIVER HOME (CORPORATE NAME AND DOCU | OWNERS ASSOCIATION, INC UMENT #) |
| _ | (CORPORATE NAME AND DOC | UMENT #) |
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| | (CONDOD ATTC MAN AND TO CO | IMENT #) |
| | CORPORATE NAME AND DOCU | J141111 1 17 J |

COVER LETTER

TO: Amendment Section Division of Corporations

| PALM RIVE NAME OF CORPORATION: | R HOMEOWENRS ASSOCIATION, INC. |
|--|--|
| N22000012322 DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee | are submitted for filing. |
| Please return all correspondence concerning th | nis matter to the following: |
| Amanda G. Gomez, Esq. | |
| | (Name of Contact Person) |
| Day Pitney LLP | |
| | (Firm/ Company) |
| 396 Alhambra Circle, Floor 14, North Tower | |
| | (Address) |
| oral Gables, FL 33134 | |
| — | (City/ State and Zip Code) |
| agarcia@daypitney.com | |
| E-mail address: (to | be used for future annual report notification) |
| For further information concerning this matter | , please call: |
| Amanda G. Gomez | 305 373-4049 |
| (Name of Contact | |
| Enclosed is a check for the following amount i | made payable to the Florida Department of State: |
| ■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of S | ž – j |
| Mailing Address | Street Address |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

HILED

| PALM RIVER HOMEOWNERS ASSOCIATION, IN | 1C. | 2024 APD - 2 |
|--|--|--|
| Name of Corporation as currently filed with the Fl | orida Dept. of State) | 2024 APR -2 AM II: 48 |
| N22000012322 | | TALLAHASSEE FI MAN |
| (Document | Number of Corporation (if known) | !nttAHASSEE.FLORI D);) |
| 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: | |
| THE CROSSING AT PALM RIVER, INC. | | *** |
| name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. | orporation" or "incorporated" or | The new the abbreviation "Corp." 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) | X) | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | r the name of the |
| Name of New Registered Agent: | | |
| <u>New Registered Office Address</u> : | (Florula s | itreet address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent. | stered Agent: am familiar with and accept the o | bligations of the position. |
| | Signature of New Registered A | 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> | <u>Name</u> | <u>Addres</u> s |
| I) Change Add | | | |
| Remove | | | |
| 2) Change Add | | | |
| Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional sheet | g additio ts, if nece | nal Articles, enter change(s) here: ssary). (Be specific) | |
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| The date of each amendment(s) ad date this document was signed. | option: | , if other than the |
| Effective date if applicable: | | |
| Effective date <u>il applicable</u> . | (no more than 90 days after amendment file date) | |
| | ck does not meet the applicable statutory filing requirements, this | date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adwas/were sufficient for approval | opted by the members and the number of votes cast for the amend | lment(s) |

| Dated March 26, 2024 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) -Jim Moyle |
| (Typed or printed name of person signing) |
| 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.

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