## N24000000366

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ANAN FIELD	VILLAGE TOWN	ІНОМЕ (	OWNERS	ASSOCIATION	N, INC.
DOCUMENT NUMBER:	000366					_
The enclosed Articles of Amendmen	t and fee are sul	omitted for filing.			-	
Please return all correspondence con	cerning this mat	ter to the followin	g:			
Michelle Sutton						
	·	(Name of Conta	ct Person	)	<del></del>	
Priority Community Management LI	l.C					
	-	(Firm/ Com	pany)		_	
225 Land Grant Street, Suite 5						
		(Addres	s)		<del></del> -	<del></del>
St. Augustine, FL 32092						
<del>.</del>		(City/ State and	Zip Code	)	<del></del>	
michelle@prioritymngmt.com						
E-mail ad	dress: (to be use	d for future annua	l report n	otification	1)	-
For further information concerning th	nis matter, pleas	e call:				
Michelle Sutton			904 at		945-8955	
(Name o	f Contact Persor	1)		a Code)	(Daytime Tele	phone Number)
Enclosed is a check for the following	amount made p	ayable to the Flor	ida Depai	tment of	State:	
S \$35 Filing Fee □\$43.7 Certi	5 Filing Fee & ficate of Status	□\$43.75 Filing I Certified Copy (Additional co enclosed)	,	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address			Street A			

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

of

FILED

BRAINAN FIELD VILLAGE TOWNHOME OWNER	KS ASSOCIATION, INC.		
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	2024 JUN -	-4 PH 1:44
N2400000366			, , rr 1 + <del>4 11</del>
(Document	Number of Corporation (i	f known)	- <u>   -   -   -   -   -   -   -   -  </u>
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not</i>	For Profit Corpo	pration adopts the following
A. If amending name, enter the new name of the co	rporation:		
name must be distinguishable and contain the word "c	orporation" or "incorpora	tted" or the abbre	The new
"Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable	225 Land Grant Si	treet	
(Principal office address <u>MUST BE A STREET ADD</u>			
	St. Augustine, FL	32092	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u> ) 225 Land Grant S	treet	
	Suite 5		
	St. Augustine, FL	32092	
D. If amending the registered agent and/or register new registered agent and/or the new registered of	ed office address in Florio	da, enter the nan	ne of the
Name of New Registered Agent:	ority Community Manager	nent	
22:	5 Land Grant Street, Suite	5	
New Registered Office Address:		(Florida street addre.	55)
<del>-</del>	Augustine		, Florida 32092
	(City)	-	(Zip Code)
New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent. I		ept the obligation:	s of the position.
$\int_{0}^{\infty}$	Signature of New Toro	istered Agent if o	chanaina

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>V</u> <u>Mi</u>	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) × Change Add	DP	Grose, Jennifer	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
Remove			
2) <u>× Change</u> Add	DV	Mills, Christopher	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
Remove  3 ) × Change Add Remove	DST	Infante, Brett §	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		Articles, enter change(s) here: ry). (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	ı:				, if other than the
Effective date if applicable:	no more than 9t	) days after amer	ndment file date)	<u> </u>	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

		ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.
1	Dated	5/21/24
:	1	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
	·	Jennifer Grose
		(Typed or printed name of person signing)
		Board President
		(Title of person signing)

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