N2400001543

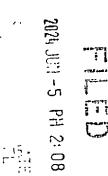
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COVER LETTER

TO: Amendment Section **Division of Corporations**

CORDERA OWNER NAME OF CORPORATION:	ERS ASSOCIATION, INC.
N24000001843	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are suf	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Michelle Sutton	
	(Name of Contact Person)
Priority Community Management LLC	
	(Firm/ Company)
225 Land Grant Street, Suite 5	
	(Address)
St. Augustine. FL 32092	
	(City/ State and Zip Code)
michelle@prioritymngmt.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Michelle Sutton	904 945-8955 at
(Name of Contact Perso	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address

Amendment Section Division of Corporations The Centre of Taliahassee

Articles of Amendment to Articles of Incorporation of

FILED

CORDERA OWNERS ASSOCIATION, INC. 2024 JUH - 5 PM 2: 08 (Name of Corporation as currently filed with the Florida Dept. of State) N24000001843 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 225 Land Grant Street B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 5 St. Augustine, FL 32092 C. Enter new mailing address, if applicable: 225 Land Grant Street (Mailing address MAY BE A POST OFFICE BOX) Suite 5 St. Augustine, FL 32092 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Priority Community Management Name of New Registered Agent: 225 Land Grant Street, Suite 5 (Florida street address) New Registered Office Address: Florida 32092 St. Augustine (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signatura of New Pagistarad Juan 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	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	DV	Zalik, Mark	4220 Race Track Rd St. Jons, FL 32259
x Remove			
2) × Change Add	<u>DP</u>	Grose, Jennifer	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
Remove 3) × Change Add Remove	DV	Mills, Christopher	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
4) × Change Add	DST	Infante, Brett \$	225 Land Grant Street, Suite 5 St. Augustine, FL 32092
Remove 5) Change Add			
Remove 6)ChangeAdd			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
-		··· /# -#-	

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	<u>.</u>
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after an	
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the numb was/were sufficient for approval.	per of votes cast for the amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were				
adopted by the board of directors.				
Signature September 18 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)				
Jennifer Grose				
(Typed or printed name of person signing)				
Board President				
(Title of person signing)				