

N24000010031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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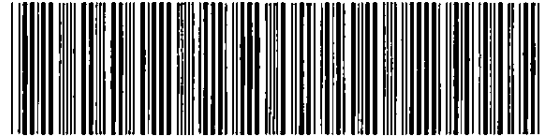
(Business Entity Name)

(Document Number)

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2024 OCT -1 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FL

Division of Corporations

NAME OF CORPORATION: Palm Ridge Mobile Home Ass. Inc

DOCUMENT NUMBER: N 24000010031

The enclosed *Articles of Amendment* and fee are submitted for filing

Please return all correspondence concerning this matter to the following

Kim Dappen

(Name of Contact Person)

Palm Ridge Mobile Home Association Inc

(Firm/Company)

100 Springbrook Rd

(Address)

Leesburg Fl. 34748

(City, State and Zip Code)

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

Kim Dappen

(Name of Contact Person)

at 352-875-0474

(Area Code) (Daytime Telephone Number)

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 Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Included)
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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

of

(Name of Corporation as currently filed with the Florida Dept. of State)

N 240000 10031

(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:

The new 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

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1409 Flora Lee Dr
Leesburg FL 34748

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1409 Flora Lee Dr
Leesburg FL 34748

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:

Name of New Registered Agent

TERRY VALLMONT

New Registered Office Address

1409 Flora Lee Dr

(Florida street address)

Leesburg

(City)

Florida

34748

(Zip Code)

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.

Terry Vallmont

Signature of New Registered Agent if changing

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 PT 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, P as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example

<u>X</u> Change	<u>P</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action

Title

Name

Address

(Check One)

- | | | | |
|---|----------|------------------------|--|
| 1) <u>X</u> Change
___ Add
___ Remove | <u>P</u> | <u>Kim Dappen</u> | <u>100 Springbrook Rd</u>
<u>icesburg, TX 74748</u> |
| 2) <u>X</u> Change
___ Add
___ Remove | <u>V</u> | <u>Terry Vallimont</u> | <u>1409 Fidea Lee Dr</u>
<u>icesburg, TX 74748</u> |
| 3) ___ Change
___ Add
___ Remove | ___ | ___ | ___ |
| 4) ___ Change
___ Add
___ Remove | ___ | ___ | ___ |
| 5) ___ Change
___ Add
___ Remove | ___ | ___ | ___ |
| 6) ___ Change
___ Add
___ Remove | ___ | ___ | ___ |

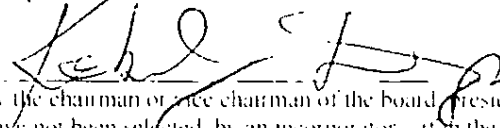
E. If amending or adding additional Articles, enter change(s) here

(attach additional sheets if necessary). (Be specific)

Kim Dappen (president) wants to drop down to
V president, because of health problems
Terry Vallimont will go from V president to
President

- [illegible]

Dated Sept 21-2024

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)

Kim Dappen
(Typed or printed name of person signing)

President
(Title of person signing)