N48824

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Samsula Hunt Club	. Incorporated		
N48824			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Kenneth Bohannon, Esq.			
	(Name of Contact Perso	n)	
Coronado Law Group, PLLC			
	(Firm/ Company)		
221 North Causeway, Suite A			
	(Address)		
New Smyrna Beach, FL 32169			
	(City/ State and Zip Cod	e)	
KBohannon@CFLLawyer.com			
E-mail address: (to be use	d for future annual report	notification	1)
For further information concerning this matter, pleas	e call:		
Kenneth Bohannon, Esq.	38 at	6	427-5227
(Name of Contact Perso		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Dep	artment of !	State:
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
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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

Articles of Amendment to Articles of Incorporation of

Samsula Hunt Club, Incorporated

(Name of Corporation as currently filed with the	Florida Dept. of State)	
N48824		
(Docume	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	"corporation" or "incorporated	l" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AD</u>		
		 ;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>OX</u>)	
D. If amending the registered agent and/or registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
- New Registered Office Address:	Œ	orida strect address)
-	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	rgistered Agent: I am familiar with and accept	the obligations of the position.
	Signature of New Regist	ered Avent, if changing

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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 Doc 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 Doc, 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 St	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	Troy Hafner	471 N. Samsula Drive New Smyrna Beach, FL 32168
x Remove			
2) Change Add	<u>P</u>	Geoffrey T. Hall	2750 S. Ridgewood Avenue Edeewater, FL 32141
Remove 3) X Change Add Remove	<u>ST</u>	Cecil C Selman, Jr.	2703 Evergreen Dr. Edgewater, FI. 32141
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	2024 OCT -8 PM 2: 12 SECRETARY OF STATE TALLAHAS SEE, FL

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	e date of each amendment(s) adoption: e this document was signed.	·	, if other	than the
Eff	ective date if applicable:	no more than 90 days after amendment file date)		
		·	_K B	
No doc	te: If the date inserted in this block does nument's effective date on the Department	not meet the applicable statutory filing requirements, this date will $\bar{\eta}$ t of State's records.	pit bel list健a. 三言 :	s the
Ad	option of Amendment(s)	CHECK ONE)	7 - 60 7 - 60 7 - 60	Philade Philade I
	The amendment(s) was/were adopted b	y the members and the number of votes east for the amendment(s) $\frac{\zeta}{\Gamma}$		page.
	was/were sufficient for approval.	<u>r</u>	PH 2:	
		r	2: 12 STATE	

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 10/1/2024
Signature SWOW Sty
(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)
Geoffrey T. Hall
(Typed or printed name of person signing)
President

(Title of person signing)