N93000001575

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2024 (*** 12-77711: 35



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Perico Shore	es Homeowners Associat	ion, Inc	
N93000001575			
The enclosed Articles of Amendment and fee	are submitted for filing.	<u></u>	
Please return all correspondence concerning the	his matter to the followir	ıg:	
Mike Walter			
	(Name of Conta	ct Person)	
Walter & Associates, LLC			
•	(Firm/ Com	pany)	
3909 E Bay Dr STE 110			
-	(Addres	is)	
Holmes Beach, FL 34217			
	(City/ State and	Zip Code)	-
MWalter@manateecpa.com			
E-mail address: (to	be used for future annua	al report notific	ation)
For further information concerning this matter	r, please call:		
Mike Walter		941 at	
(Name of Contac		(Area Co	de) (Daytime Telephone Numbe
Enclosed is a check for the following amount	made payable to the Flo	rida Departmer	nt of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Fee & S43.75 Filing Status Certified Cop (Additional co- enclosed)	y Copy is C	52.50 Filing Fee fertificate of Status fertified Copy Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Addr Amendment Division of C The Centre	Section

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Perico Shores Homeowners Association, Inc.

EN TO

(Name of Corporation as currently filed with the Florid N93000001575	da Dept. of State)	2024: 12 73311: 36
(Document Nu	ımber of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Ne</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorpo	rated" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered		rida, enter the name of the
new registered agent and/or the new registered offi N/A	ce address:	
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and ac	ecept the obligations of the position.
	Signature of New R	egistered 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	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P, T</u>	Leon Martino	7 Denny Road Guilderland, NY 12084
Remove 2) Change	VP, S	Julianne Gatewood	403 107th Ct W Bradenton, FL 34209
Remove 3) Remove Add X Remove	<u>P. T</u>	Andrew Lischin	3909 E. Bay Dr., STE 110 Holmes Beach, FL 34217
4) Change Add	VP, S	Kathie Gifford	3909 E. Bay Dr., STE 110 Holmes Beach, FL 34217
X Remove 5) Change Add Remove			
6) Change Add			
E. If amending or adding (attach additional sheet)		cles, enter change(s) here: (Be specific)	
			

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• ′	
	
<u> </u>	<u> </u>
The date of each amendment(s) adoption:	if other than the
date this document was signed.	(if other than the
Effective date if applicable:	
(no more than 90 days after amendment file	e date)
ino more man 70 auys after amenamem fice	
Note: If the date inserted in this block does not meet the applicable statutory filing re-	quirements, this date will not be listed as the
document's effective date on the Department of State's records.	•

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of 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.
Dated $\frac{05/25/2024}{}$
Signature Allawe Hallwood (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)
(Typed or printed name of person signing)
V.P. and Secretary
(Title of person signing)

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