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COR AMND/RESTATE/CORRECT OR O/D RESIGN ROYAL TOWN HOMES HOMEOWNERS ASSOCIATION, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

	OMES HOMEOWNE	RS ASSOCIA	TION, INC.
N94000001179 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fcc are sul	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Michael Merino			
	(Name of Contact Po	rrson)	
Michael Merino PA			
	(Firn√ Company)	
6741 Orange Dr			
	(Address)	<u> </u>	
Davie, FL 33314			
	(City/ State and Zip (Code)	
vhampe@coincast.net			
E-mail-address: (to be use	d for future annual rep	ort notification	i)
For further information concerning this matter, please	e call:		
Michawl Merino			321-7701
(Name of Contact Person	1) at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida I	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Piling Fee cate of Status ed Copy is sed)
Mailing Address Amendment Section Division of Corporations	Am	eet Address endment Secti ision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroc Street, Suite 810

P.O. Box 6327

Tuliahassec, FL 32314

	Articles of Amendment	2022 - 1/2 =
	to Articles of Incorporation of	2023 NOV 15 AM 8:
ROYAL TOWN HOMES HOMEOWNERS ASSO	OCIATION, INC.	Color Color
Name of Corporation as currently filed with the	e Florida Dept. of State)	N/15
N94000001179		· · · · · · · · · · · · · · · · · · ·
(Docum	nent Number of Corporation (if knows	n)
Pursuant to the provisions of section 617.1006, Floumendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Pr</i>	ofit Corporation adopts the followin
A. If amending name, enter the new name of the	e corporation:	
		The new
name must be distinguishable and contain the word 'Company" or "Co." may not he used in the name	l "corporation" or "incorporated" or e.	the abbreviation "Corp." or "Inc."
3. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
D. If amending the registered agent and/or regi- new registered agent and/or the new register	stered office address in Florida, ent	er the name of the
	Michael H Merino P.A.	
Name of New Registered Agent:	6741 Orange Dr	-
		stract address)
New Registered Office Address:		:
	Davie	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing leaves by accept the appointment as registered agen	Registered Agent: it. I am familiar with and agreept the	Migations of the position.
-	Signature of Ney Registered	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 und 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>ΡΥ</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			-
Remove			
5) Change Add			
Remove			
6) Change Add	•		
Remove			
E. If amending or addin (attach additional sheet	g additjo s. if nece	nal Articles, enter change(s) here: ssary). (Be specific)	

"	
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	
The date of each intenderenite) adoption this document was signed.	otion:
Effective date Applienble:	
	(no more than 90 days after an endment file data)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt was/were sufficient for approval.	sted by the members and the mirriber of votes cast for the appearament(s)

2	There are no members or members antitled to you on the amendment(s). The argendment(s) was/were adopted by the board of directors.
	Dated
	Signature Languine & Langue
	(By the khalitum of vice chalitum of the board, provident or other officer-if directors have not been selected, by an incorporator — if in the bands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Toensings
	(Inite of passen signing)