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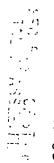
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Oakwood Forest Ass	sociation, Inc.			
	N95000003758	,			
DOCUMENT NUMBER:					
The enclosed Articles of An	nendment and fee are sub-	mitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Milton Fulton					
		(Name of Contact Po	erson)		
		(Firm/ Company	······································		
4114 Windsor Park Dr E					
		(Address)			
Jacksonville, FL 32224					
· · · · · · · · · · · · · · · · · · ·		(City/ State and Zip	Code)		
mfulton441@gmail.com					
	-mail address: (to be used	for future annual re	oort notification	n)	
For further information con-	cerning this matter, please	call:			
Carol Killworth		at	317	507-7303	
	(Name of Contact Person			(Daytime Telephone Number)	
Enclosed is a check for the	following amount made pa	ayable to the Florida	Department of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	D Filing Fee icate of Status ied Copy tional Copy is sed)	
Mailing A		<u>St</u>	reet Address		
	ent Section		nendment Secti		
Division of Corporations		Division of Corporations			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Oakwood Forest Association, Inc.					
(Name of Corporation as currently filed with th	e Florida D	ept. of State)	<u> </u>		
N9000003758					
(Docur	nent Numbe	r of Corporation (if ki	nown)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not Fo</i>	r Profit Corporatio	n adopts the	e following
A. If amending name, enter the new name of th	e corporatio	on:			
N/A					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		on" or "incorporated	l" or the abbreviati	on "Corp."	
B. Enter new principal office address, if applica	hle:	4114 Windsor Park D	or E		
(Principal office address MUST BE A STREET A	CDDDCCC	Jacksonville, FL 322	24	•	
				<u> </u>	202
	-				- } 8 -
C. Enter new mailing address, if applicable:	BOV:	N/A			¥-
(Mailing address MAT BE A POST OFFICE	er new mailing address, if applicable: N/A N/A Or O				
				<u>m</u> r	<u> </u>
					= _
D. If amending the registered agent and/or regi	stared office	a address in Florida	anter the name of	į	သ
new registered agent and/or the new register			enter the name of	<u>the</u>	
Name of New Registered Agent:	Milton Ful	ton			
	4114 Wind	sor Park Dr E			
		(FI	orida street address)		
New Registered Office Address:					
	Jacksonvill	le	, Flo	rida <u>32224</u>	
		(City)	(2	(ip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			the phliantions of t	he position	
тистом иссерств ирропинен из гезімегей идел	ii. Tum jum A. A.	il DAI	me omizanons oj t	не розшоп,	
-	N/el	nature of New Registe	erad Ament if char	aina	 -
	t SiX	nmare of trem negisie	льи луст, у спап	5448	

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: XChange X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Bruce Swindell	P O BOX 50123 JACKSONVILLE BEACH, FL 322
X Remove 2) Change X Add	PD	Milton Fulton	P O BOX 50123 JACKSONVILLE BEACH, FL 322
Remove 3) Remove × Add Remove	TSD	Carol Killworth	PO BOX 50123 JACKSONVILLE BEACH, FL 322
4) Change Add	<u>v</u>	Carol Light	P O BOX 50123 JACKSONVILLE BEACH, FL 322
 X Remove 5) Change X Add 	<u>VD</u>	Carol Manning	P O BOX 50123 JACKSONVILLE BEACH, FL 322
Remove 6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	

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			.		
					
					
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					<u>_</u>
	·				<u> </u>
					
					
					
The date of each amendment	4/14/21				if other than the
date this document was signed	, auopuon,	·			, ir omer man me
Effective date <u>if applicable</u> :	4/14/21				
	(no more th	an 90 days after am	endment file date)		· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in the document's effective date on the	is block does not meet he Department of State	the applicable statuto s records.	ory filing requiremen	nts, 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 number of votes cast for the amendment(s) was/were sufficient for approval.

dopted by the board	To directors.
Dated _	New 1, 2021
Signature _	Nilson help
h	y the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)
	Milton Fulton
	(Typed or printed name of person signing)

(Title of person signing)