## N95000003758

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Oakwood Forest Ass ON:	sociation, Inc.		···
DOCUMENT NUMBER:	N95000003758			
The enclosed Articles of An		mitted for filing.	••	
Please return all correspond		_		
Steven Libman				
		(Name of Contact Pe	rson)	
		(Firm/ Company	)	
4137 Windsor Park Dr E				
		(Address)		
Jacksonville, FL 32224				
		(City/ State and Zip (	Code)	·- ·- ··
stevenlibman@gmail.com				
F	-mail address: (to be used	for future annual rep	ort notification	1)
For further information cond	cerning this matter, please	call:		
Chris Crosby		at	973	462-1123
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	iyable to the Florida I	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee seate of Status sed Copy stional Copy sed)
Mailing Address		Str	eet Address	

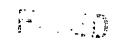
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Oakwood Forest Association, Inc.



(Name of Corporation as currently filed with the Florida Dept. of State) N9000003758 (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: N/A. 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. 4137 Windsor Park Dr E B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32224 C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: Steven Libman Name of New Registered Agent: 4137 Windsor Park Dr E (Florida street address) New Registered Office Address: Jacksonville (City) 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.

Signature of New 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 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 Sr	<u>nes</u>				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change Add	PD	Tim Cook	PO Box 50123 Jacksonville, FL 32224			
x Remove						
2) Change Add	PD	Steven Libman	PO Box 50123 Jacksonville, FL 32224			
Remove  Change  Add  Remove	TSD	Christopher Crosby	PO Box 50123  Jacksonville, FL 32224			
4) Change Add	<u>v</u>	Kevin O'Neil	PO Box 50123 Jacksonville, FL 32224			
Remove  5) Change Add  * Remove	TSD	Carol Killworth	PO Box 50123 Jacksonville, FL 32224			
6) Change Add		Carol Manning	PO Box 50123 Jacksonville, FL 32224			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						

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	2/5/2023	
The date of each amenda date this document was sig	· · · · · · · · · · · · · · · · · · ·	if other than the
Effective date if applicab	2/5/2023	
виссиче часе <u>и аррисар</u>	e:  (no more than 90 days after amendment file o	date)
Note: If the date inserted i	n this block does not meet the applicable statutory filing requ	
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 $\frac{3}{\sqrt{5}} \frac{\sqrt{3}}{\sqrt{2}}$	
Signature	
(By the chairman of 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)	
Steven Library	
(Typed or printed name of person signing)	
Pasiden	
(Title of person signing)	