N15000011100

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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(Document Number)	
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Amend

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I ALBRITTON

COVER LETTER

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Rapalo Homeowners' Association, Inc					
	DOCUMENT NUMBER: N15000011100				
	of Amendment and fee are s	ubmitted for filing.			
Please return all corre	spondence concerning this m	atter to the following:			
	Rebecca Sarver				
		Name of Contact Perso	n		
	D R Horton Inc				
		Firm/ Company			
	10641 Dan C Danie / Cir. 340	• •			
	10541 Ben C Pratt / Six Mil				
	Address				
	Fort Myers, FL 33966				
City/ State and Zip Code					
RI Sa	rver@DRHorton.com				
E-mail address: (to be us		ced for fiture annual report	notification)		
	2 man address: (to be a	soc for facule billians report	Total Callony		
For further information concerning this matter, please call:					
Rebecca Sarver		at (²³⁹	225-2623		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:			urtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Malling Address		Street	Address		

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 6, 2017

REBECCA SARVER D R HORTON INC 10541 BEN C PRATT/SIX MILE CYPRESS PKWY FORT MYERS, FL 33966

SUBJECT: RAPALO HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N15000011100

We have received your document for RAPALO HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 317A00018339



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2017

REBECCA SARVER D R HORTON INC 10541 BEN C PRATT/SIX MILE CYPRESS PKWY FORT MYERS, FL 33966

SUBJECT: RAPALO HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N15000011100

We have received your document for RAPALO HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The name and title of the person signing the document must be noted beneated opposite the signature.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 017A00016813

Articles of Amendment to

If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: The new he must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." or "Inc." Impany" or "Co." may not be used in the name. Enter new principal office address, if applicable: Incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the	`	•		a. A
(Document Number of Corporation (if known) results to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following tendment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: The new must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "inc." or "or "or "inc." or "inc." Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: Florida street address: Florida	Arti	cles of Amendment		
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	New Registerea Office Address:			
(Cny) $(Zip Coae)$		(City)		
		(Cny)	(ZIP	Coae)
				

P = President; V= Vic Executive Officer; CFo held. President, Treast	ets, if necessary, /director title by ve President: T= O = Chief Finar urer, Director w) v the first letter of the office title: Treasurer; S= Secretary; D= D ncial Officer. If an officer/direct ould be PTD.	irector; TR= Trustee; C = Chairman or Clerk; CEO = Chief or holds more than one title, list the first letter of each office
Changes should be not a change, Mike Jones, Was Remo	leaves the corpo	ration. Sally Smith is named the	e is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	Y M	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	VD	Thomas McLeo	SIX Mile Cypress Parkway FORT Myers, FL 33966
2) Change Add Remove	VD	Chuck Wilken	Six Mice Cypress Parkway Fort Myers, FL33966
3) Change Add Remove		· .	
4) Change Add Remove			
5) Change Add Remove			
6) Change		· · · · · · · · · · · · · · · · · · ·	

. If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

___ Add

_ Remove

If amending or adding additional sheets, if nece	nal Articles, ente ssary). (Be spec		;		
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The date of adoption of the amendment	ent(s) was: 8.4.17
Effective date if applicable:	
(no	more than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was (we for the amendment was suff	re) adopted by the members and the number of votes cast acient for approval.
	embers entitled to vote on the amendment. The dopted by the board of directors.
	hairman of the board, president or other officer- if directors an incorporator- if in the hands of a receiver, trustee, or ciary, by that fiduciary.)
Rebecca Sarver	
(Typed or p	rinted name of person signing)
Secretary	
(Title	of person signing)

FILING FEE: \$35