

197000002030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

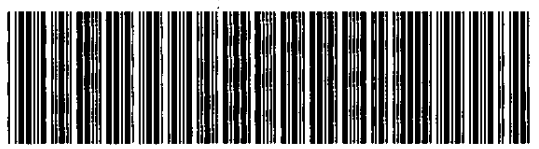
(Business Entity Name)

(Document Number)

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2010 JUL 28 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend
SJ*

7-28-10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD

DOCUMENT NUMBER: N97000002030

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK E. ADAMCZYK, ESQ.

(Name of Contact Person)

GOEDE & ADAMCZYK, PLLC

(Firm/ Company)

8950 FONTANA DEL SOL WAY, STE. 100

(Address)

NAPLES, FL 34109

(City/ State and Zip Code)

MARK@FLORIDACOMMUNITYLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK E. ADAMCZYK

(Name of Contact Person)

at (239) 331-5100

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2010

MARK E. ADAMCZYK, ESQ.
GOEDE & ADAMCZYK, PLLC
8950 FONTANA DEL SOL WAY, STE. 100
NAPLES, FL 34109

SUBJECT: OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD
ASSOCIATION, INC.
Ref. Number: N97000002030

We have received your document for OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 310A00017049

RECEIVED
2010 JUL 28 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

OAK HOLLOW AND MAHOGANY RUN NEIGHBORHOOD ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N97000002030

(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:

The new 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.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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C. Enter new mailing address, if applicable:
(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:

Name of New Registered Agent: GOEDE & ADAMCZYK, PLLC
8950 FONTANA DEL SOL WAY, S

New Registered Office Address: (Florida street address)

NAPLES, Florida 34109
(City) (Zip Code)

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>DIR/P</u>	<u>BRUCE WILLIAMS</u>	<u>7025 SUGAR MAGNOLIA CIR</u> <u>NAPLES, FL 34109</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>DIR/V</u>	<u>CLYDE GATLIN</u>	<u>6464 AUTUMN WOODS BLVD</u> <u>NAPLES, FL 34109</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>DIR</u>	<u>TOM DINAN</u>	<u>7058 SUGAR MAGNOLIA</u> <u>NAPLES, FL 34109</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: JANUARY 2009
(date of adoption is required)

Effective date if applicable: APRIL 26, 2010
(no more than 90 days after amendment file date)

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.
- 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 JULY 7, 2010

Signature B. J. Williams
(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)

BRUCE WILLIAMS
(Typed or printed name of person signing)

PRESIDENT/DIRECTOR
(Title of person signing)