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## **COVER LETTER**



TO: Amendment Section Division of Corporations

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-1	

NAME OF CORPORATION	Wilderness Country C	lub, Inc.		
DOCUMENT NUMBER:	730097			
The enclosed Articles of Am				
Please return all corresponde	ence concerning this matter	to the following:		
Ulia S. Walsh				
<del></del>	(	Name of Contact Pers	son)	
Wilderness Country Club, I	ne.			
		(Firm/ Company)	<u> </u>	
101 Clubhouse Drive				
		(Address)	<del></del>	<del></del>
Naples, FL 34105				
	(	City/ State and Zip Co	ode)	
uwalsh@wildernesscc.com				
	-mail address: (to be used	for future annual repo	t notification	<u>)</u>
For further information conc	eerning this matter, please c	all:		
Thomas DeNisco		, te	717	979-2434
	(Name of Contact Person)			(Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made pay	able to the Florida De	partment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy is osed)
Moiling 5	ddaoss	Stra	at Addrage	

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

## Articles of Amendment to Articles of Incorporation of

Wilderness Country Club, Inc.

(None of Company)		Le Clad with the Chaids Done of Canto	
7390097	as currem	ly filed with the Florida Dept. of State)	
	nent Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	s, this Florida Not For Profit Corporation ac	lopts the f
A. If amending name, enter the new name of the	corporati	on:	
N/A			:
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" or the abbreviation '	Corp." or
B. Enter new principal office address, if applica	<u>ble:</u>	N/A	
(Principal office address <u>MUST BE A STREET A</u>			
C. Enter new mailing address, if applicable:	DAV.	N/A	
(Muiling address <u>MAY BE A POST OFFICE I</u>	BOX)		
		_ <del></del>	
D. If amending the registered agent and/or regis	stered offic	e address in Florida, enter the name of the	
new registered agent and/or the new register			
Name of New Registered Agent:	N/A		
New Registered Office Address:		(Florida street address)	
New Negistered Office Address.			
		(City) (Zip C	Tode)
		·	.041)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			osition.
			3.5
_	Si	gnature of New Registered Agent, if changing	2 7.0
			:

Page 1 of 4

## == ----- if amending the Officers and/or Directors, enter the title and name of each officer/director being removed 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, Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter cheld. 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 a a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, F Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Jeffrey A. Schreur	102 Tall Pine Lane, No. 310
Add			Naples, FL 34105
X Remove			
2) Change	D	Benjamin G. Rae	103 Wilderness Drive, No. 20
X Add			Naples, FL 34105
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	
		_
		_
<del> </del>		
	<del></del>	
<u>.</u>	·	_
		_
		_
		_
		_

.....

The date of each amendment(s) a date this document was signed.	adoption:
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
<b>Note:</b> If the date inserted in this b document's effective date on the E	lock does not meet the applicable statutory filing requirements, this date will not be department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated	9/9/19
Signature	Rom M Ben
have not b	airman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or a ppointed fiduciary by that fiduciary)
	TOMAS M. De NISO  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Prasidor
	(Title of person signing)