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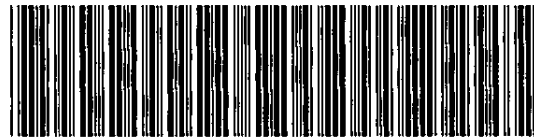
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OCT 10 2012  
EXAMINER

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**155 Office Plaza Dr Ste A Tallahassee FL 32301**

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**DATE: 10-09-2012**

**NAME: HARBOR NAPLES MANAGEMENT LLC**

**TYPE OF FILING: ARTICLES OF AMENDMENT**

**COST: \$25**

**RETURN:**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HARBOR NAPLES MANAGEMENT, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS MITCHELL

Name of Person

HARBOR NAPLES MANAGEMENT, LLC

Firm/Company

1440 HIGHWAY A1A

Address

VERO BEACH, FL 32963

City/State and Zip Code

tmitchell@hrconline.net

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

For further information concerning this matter, please call:

THOMAS MITCHELL

Name of Person

at (772) 492-5002

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**HARBOR NAPLES MANAGEMENT, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/9/2004 and assigned  
Florida document number 204000002276

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: NATIONAL CORPORATE RESEARCH, LTD., INC.

New Registered Office Address: 155 Office Plaza Drive  
*Enter Florida street address*

Tallahassee, Florida 32301  
*City Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Colleen McMahon, Asst. Sec.  
If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRESIDENT</u>	<u>TIMOTHY S. SMICK</u>	<u>1440 HIGHWAY A1A</u> <u>VERO BEACH, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE PRESIDENT</u>	<u>SARABETH HANSON</u>	<u>1440 HIGHWAY A1A</u> <u>VERO BEACH, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SECRETARY/VICE PRESIDENT</u>	<u>CHARLES JENNINGS</u>	<u>1440 HIGHWAY A1A</u> <u>VERO BEACH, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>TREASURER</u>	<u>THOMAS MITCHELL</u>	<u>1440 HIGHWAY A1A</u> <u>VERO BEACH, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>ASSISTANT SECRETARY</u>	<u>DONNA DORSEY</u>	<u>1440 HIGHWAY A1A</u> <u>VERO BEACH, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 9/21/12, \_\_\_\_\_

T. T. Mitchell TREASURER  
Signature of a member or authorized representative of a member  
Thomas Mitchell  
Typed or printed name of signee

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