# N030000008

(Re	equestor's Name)	<del></del>
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☐ bick-nb	☐ WAIT	MAIL
(Bu	rsiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

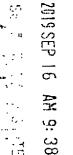
Office Use Only

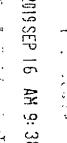


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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2019

G LARRY SIMS DORAN, SIMS, WOLFE, CIOCCHETTI & YOON 1020 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32114

SUBJECT: PINNACLES PROFESSIONAL PARK ASSOCIATION, INC.

Ref. Number: N03000000890

We have received your document 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):

You failed to make the correction(s) requested in our previous letter.

PLEASE NOTE THAT ALL OF THE PAGES SUBMITTED MUST BE FOR A NOT FOR PROFIT CORPORATION. PLEASE COMPLETE PAGE 4 OF 4 AND RESUBMIT THE ENTIRE DOCUMENT.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 919A00016899

www.sunbiz.org

2019



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2019

G LARRY SIMS DORAN, SIMS, WOLFE, CIOCCHETTI & YOON 1020 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32114

SUBJECT: PINNACLES PROFESSIONAL PARK ASSOCIATION, INC.

Ref. Number: N03000000890

We have received your document 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 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.

ON PAGE 2 OF 4, PLEASE COMPLETE ITEM #4.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 319A00016101

### **COVER LETTER**

TO: Amendment Section Division of Corporations

100

NAME OF CORPORATION: PINNACLE	S PROFESSIONAL PARI	K ASSOCIATIO	N, INC	
N0300000890				
DOCUMENT NUMBER:			<del>-</del>	
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning the	nis matter to the following:			
G LARRY SIMS				
	(Name of Contact	Person)	<u>.</u>	<u> </u>
DORAN, SIMS, WOLFE, CIOCCHETTI &	YOON			
	(Firm/ Comp	any)		
1020 W INTERNATIONAL SPEEDWAY B	LVD			
•	(Address)	)		<del></del>
DAYTONA BEACH, FL 32114				
	(City/ State and Z	ip Code)		
LSIMS@DORANLAW.COM				
E-mail address: (to	be used for future annual	report notification	en)	$ \checkmark$
For further information concerning this matter	, please call:			
LARRY SIMS		386 at	253-1111	
(Name of Contact	Person)		(Daytime Telephone N	lumber)
Enclosed is a check for the following amount i	nade payable to the Florid	a Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Fee & S43.75 Filing F Status Certified Copy (Additional cop enclosed)	Certi y is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Address Amendment Section		Street Address Amendment Sec	tion	

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

#### Articles of Amendment to Articles of Incorporation of

PINNACLES PROFESSION	)NAL PARK ASSO	CIATION, INC.	
(Name of Corporation as current	tly filed with the Fl	orida Dept. of State)	
N03	000000890		
(Document Number	er of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not I</i>	For Profit Corporation adopts the foll	lowing
A. If amending name, enter the new name of the corporati	<u>on:</u>		
	****		ie new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporat	•	
B. Enter new principal office address, if applicable:			3
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			2019 \$EP
		an	9
C. Enter new mailing address, if applicable:	71-		=
(Mailing address MAY BE A POST OFFICE BOX)			ڣ
		! <u></u> !	38
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ag	e address in Florid: ldress:	a, enter the name of the	
Name of New Registered Agent.			
<del></del>		Florida sireei address)	<del></del>
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered is the hereby accept the appointment as registered agent. I am fam	Ngent: uiliar with and accep	ot the obligations of the position.	
	mature of New Revi	stered Avent if changing	<del></del>

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	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	RONALD BATHAW	PO BOX 352077
Add X			PALM COAST, FL 32135
Remove			
2) Change	D	FRANCIA BATHAW	PO BOX 352077
Add X Remove			PALM COAST, FL 32137
3) Change	<u>S</u>	RENATA A ALFONSO	84 PINNACLES DR. STE 200
X Add			PALM COAST, FL 32164
Remove			
4) Change	P	DON JOSEPH A. ALFONSO	84 PINNACLES DR. STE 200
X Add			PALM COAST, FL 32174
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change	418		
Add			•
Remove			

(attach additional sheets, if	necessary). (Be specij	change(s) here:		
				<del></del>
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The date	of each amendment(s) adoption:	, if other than th
date this d	ocument was signed.	
Effective of	date <u>if applicable:</u>	
	(no more than 90 days after amendment file date)	
Note: If if document'	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not is effective date on the Department of State's records.	be listed as the
Adoption	of Amendment(s) (CHECK ONE)	
☐ The a	emendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) were sufficient for approval.	•
There adopt	e are no members or members entitled to vote on the amendment(s). The amendment(s) was/were ted by the board of directors.	
	Dated 09-06-2019	,
	Signature Arancia & Batha	
	(Dy 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)	_
	FRANCIA F BATHAW  (Typed or printed name of person signing)	
	Administrator Officer	