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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Belle Chase Homeo	wners Association Inc	, 	
N0400003534 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
L. Michelle Pentifallo			
	(Name of Contact Pe	rson)	
First in Property Management			
-	(Firm/ Company)	
6364 Treiman Blvd.			
	(Address)	,	
Webster, FL 33597			
	(City/ State and Zip C	Code)	
michelle@firstinpm.com			
E-mail address: (to be used	d for future annual rep	ort notification	1)
For further information concerning this matter, please	e call:		
Michelle Pentifallo	at	813	943-3300
(Name of Contact Persor	n)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida I	Department of	State:
■ \$35 Filing Fee		Cenif Cenif	D Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div	eet Address acadment Sect rision of Corpo c Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida I	Dent of State)		
	•	- 4/0//DDD	1172
Belle Chase Homeowners	Association, I	nc. NO90000	
(Document Numb	per of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profi</i>	Corporation adopts the fo	llowing
A. If amending name, enter the new name of the corporat	tion:		
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or th	e abbreviation "Corp." or	"Inc."
B. Enter new principal office address, if applicable:	6364 Treiman Blvd.		
(Principal office address MUST BE A STREET ADDRESS	Webster, FL 33597		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6364 Treiman Blvd.		ollowing The new
	Webster, FL 33597		
			2
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		he name of the	ו אור ו
N. O. D. S. J. J.			
Name of New Registered Agent:			<u></u>
New Registered Office Address:	(Florida stre	eet address)	0; 08
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered	LAgont		
I hereby accept the appointment as registered agent. I am fa		igations 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:

(Attack 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 Chinge X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes enes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change Add	<u>P</u>	Michael Caldarelli	6013 Wesley Grove Blvd. Ste. 102 Wesley Chapel, FL 33544
× Remove			
2) × Change Add	<u>P</u>	Darrel Harden	6364 Treiman Blvd. Webster, FL 33544
Remove 3) Remove * Add Remove	<u>T</u>	Ronny Wiemer	6364 Treiman Blvd Webster, FL 33544
4) Change Add	VP	Thomas Shaw	6364 Treiman Blvd. Webster, FL 33544
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
-		<u>-</u>	·
		, , , , , , , , , , , , , , , , , , ,	

The date of each amendment(s) adoption: 5/1/2023, if other than the
date this document was signed.
Effective date if applicable:
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.

Authentisign ID: 61A13620-90FC-ED11-907A-6045BDD47FEA

Dated	5/25/2023
Daica	—— Authentises:
	Marrall Haylan
Signatur	
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Darrell Harden
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

I am writing to inform you about my decision to leave my position as President of Belle Chase, effective 3/31/23.

My family commitments and work schedule have made it impossible to give the board the time it requires to be truly effective in my position. I have seen substantial growth during the time that I have served and am confident you will continue to grow.

Thank you,

Michael Caldarelli

model alburell 3/2/23

(352) 232-5995