

NO500000 2630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

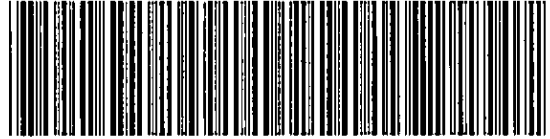
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200338667062

01/06/20--01015--020 **25.00

05/03/20--01015--001 **10.00

2020 JUN - 8 PM 6:38
CLERK OF SUPERIOR COURT
JANISSE W. HILL

FILED

JUN 08 2020
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2020-03-25 1:50

March 25, 2020

LISA ELLIOTT
GULF COAST PROPERTY MANAGEMENT
11051 GATEWOOD DRIVE
LAKEWOOD RANCH, FL 34211

SUBJECT: THE SARASOTA/BRADENTON CHAPTER OF THE NATIONAL
ASSOCIATION OF RESIDENTIAL PROPERTY MANAGERS, INC.
Ref. Number: N05000002630

We have received your document for THE SARASOTA/BRADENTON CHAPTER
OF THE NATIONAL ASSOCIATION OF RESIDENTIAL PROPERTY
MANAGERS, INC. and your check(s) totaling \$35.00. However, the enclosed
document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section
617.1006, Florida Statutes. Please see the attached information.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 620A00002393

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _____ The Sarasota Bradenton Chapter of the National Association of Residential Property Managers

DOCUMENT NUMBER: NO\$000002630

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

Please return all correspondence concerning this matter to the following:

Lisa Elliott

(Name of Contact Person)

Gulf Coast Property Management

(Firm/Company)

11051 Gatewood Drive

(Address)

Lakewood Ranch, FL 34211

(City, State and Zip Code)

telnet@choosegulfoast.com

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

For further information concerning this matter, please call:

Lisa Elliott

941

782-1559

at

(Name of Contact Person)

(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)
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Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

The Sarasota Bradenton Chapter of the National Association of Residential Property Managers

(Name of Corporation as currently filed with the Florida Dept. of State)

N05000002630

(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 Sarasota Manatee Chapter of the National Association of Residential Property Managers Corp 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)

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:

(Florida street address)

New Registered Office Address:

(City) Florida (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

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2020 JUN -8 PM 6:39
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
SARASOTA COUNTY, FLORIDA

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith


Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP	JODI LINKENHOKER	11051 GATEWOOD DRIVE LAKEWOOD RANCH, FL 34211
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary) (Be specific)

- ☐ 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 5/28/2020

Signature 

(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)

Lisa Elliott

(Typed or printed name of person signing)

Secretary

(Title of person signing)