

Electronic Filing Cover Sheet

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(((H16000147653 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : ROBERT D. ROYSTON, JR.,

Account Number : I20150000047

Phone : (239)205-2225

Fax Number

: (239)205-2016

**Enter the email address for this business entity to be used for Lut annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SERENGETI COMMUNITY ASSOCIATION, INC.

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6/16/2016

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rom: Rob Royston	rom:	Rob	Ro	vston
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Articles of Amendment to Articles of Incorporation

•	Articles	of Incorporation of	
SERENGETI COMMUNITY ASSOCIATION, IN	NC.		
(Name of Corporation	as current	ly filed with the Florida I	Dept. of State)
N05000003235			
(Docun	nent Numbe	r of Corporation (if known)
Pursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
L. If amending name, enter the new name of the	e corporatio	on:	
·			The new
name must be distinguishable and contain the word		ion" or "incorporat <mark>ed"</mark> or	
Campany" or "Co." may not be used in the name B. Enter new principal office address, if applica	_	17570 North Tamiami Tra	iil
Principal office address <u>MUST BE A STREET A</u>	DDRESS)	Suite 2	
•		North Fort Myers, FL 339	003
		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	17570 North Tamiami Tra	ıil
		Suite 2	
		North Fort Myers, FL 33	903
 If amending the registered agent and/or registered agent and/or the new register. 			r the name of the
	Michael C		
Name of New Registered Agent:	17570 Nor	th Tamiami Trail	
•	175701401		street addressi)
New Registered Office Address:		,, ,,,,,,	
	North Fort	<u> </u>	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing Foundation hereby accept the appointment as registered agen	Registered <i>t</i> t. I am fan	Agent: niliar with and accept the o	bligations of the position.
	7	muld (/ 基準 5
~~	Sig	gnature of New Registered	Agent, if changing to 23 A b.

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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:

To:

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> Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Valerie Thivierge	
Add			
x Remove			
2) Change	DST	Albert Thivierge	
Add			
x Remove			
3)Change	DVP	Matthew Thivierge	
Add			· · · · · · · · · · · · · · · · · · ·
. x Remove			
4) Change	PD	Michael Case	17570 North Tamiami Trail
x Add			Suite 2
Remove			North Fort Myers, FL 33903
5) Change			
Add			
Remove			
6) Change			
Add			,
Remove			

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E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
	<u> </u>			
,				
-				
	,			

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(((H16000147653 3))) The date of each amendment(s) adoption: _, if other than the date this document was signed. Effective date if applicable: (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. (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. 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) (Typed or printed name of person signing)

(Title of person signing)