

No 5000010529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

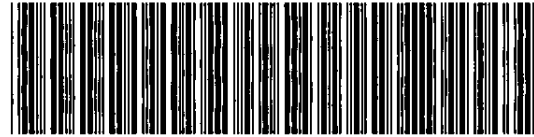
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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C. LEWIS

JUL 24 2014

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 11, 2014

MICHELLE K. CANTRELL
3426 HANCOCK BRIDGE PKWY
#1203
NORTH FORT MYERS, FL 33903 US

SUBJECT: NEEL PLAZA COMMERCIAL CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000010529

We have received your document for NEEL PLAZA COMMERCIAL CONDOMINIUM ASSOCIATION, 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):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 014A00014984

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Neel Plaza Commercial Condominium Association, Inc

DOCUMENT NUMBER: NO 5000010529

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

Please return all correspondence concerning this matter to the following:

Michelle K Cantrell
(Name of Contact Person)

Neel Plaza Commercial Condominium Association, Inc
(Firm/ Company)

3426 Hancock Bridge Pkwy #1203
(Address)

MOBILE AL 33903
(City/ State and Zip Code)

Michelle@baybreeze.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle K Cantrell at (239) 464-2323
(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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|---|--|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Neel Plaza Commercial Condominium Association, Inc

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

NO50000010529

(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 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)

3426 Hancock Bridge Pkwy
#1203

North Fort Myers Fl 33903

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3426 Hancock Bridge Pkwy
#1203

North Fort Myers Fl 33903

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:

Michelle K Cantrell

3426 Hancock Bridge Pkwy #1203

(Florida street address)

New Registered Office Address:

North Fort Myers, Florida

(City)

33903

(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.

Michelle K Cantrell

Signature of New Registered Agent, if changing

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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:

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:

Change PT John Doe
 Remove V Mike Jones
 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	<u>P</u>	<u>Michelle K Cantreel</u>	<u>3426 Hancock Bridge Pkwy</u> <u>#1203</u> <u>North Fort Myers Fl 33903</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>DP</u>	<u>Debra J Neel</u>	<u>3403-3 Hancock Bridge Pkwy</u> <u>North Fort Myers Fl</u> <u>33903</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>DST</u>	<u>Suzanne K Wilson</u>	<u>3403-3 Hancock Bridge Pkwy</u> <u>North Fort Myers Fl 33903</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>David M Winkler</u>	<u>1728 meadowood St</u> <u>Sarasota Fl</u> <u>34231</u>
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	_____	_____	_____

The date of each amendment(s) adoption: June 9, 2014, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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.
- 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 July 21, 2014

Signature Michelle X Cantrell

(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)

Michelle X Cantrell

(Typed or printed name of person signing)

President.

(Title of person signing)

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