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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : J.KEVIN DRAKE, P.A.

Account Number : I20020000002 Phone : (941)954-7750

fax Number : (941)951-1509

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

Email	Address:	F.BIANCHI@VERIZON.NET	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN PORTOFINO OF VENICE LAND CONDOMINIUM ASSOCIATION, INC.

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March 3, 2011

## FLORIDA DEPARTMENT OF STATE

PORTOFINO OF VENICE LAND CONDOMINIUM ASSOCIATION, INC. 109 U.S. 41 BYPASS N
VENICE, FL 34285

SUBJECT: PORTOFINO OF VENICE LAND CONDOMINIUM ASSOCIATION, INC. REF: N05000011133

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: B11000056027 Letter Number: 211A00005341



£((H11000056027 3)))

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Portofino of V	enice Land Condominiu	m Association, Inc.
DOCUMENT NUM	(BER: N05000011133		
The enclosed Article	s of Amendment and fee are sul	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
		I DRAKE, ESQ.	
	(Name of	Contact Person)	
	J. KEVII	N DRAKE, P.A.	
	(Firm	V Company)	
	1432 FI	RST STREET	
	(	Address)	
		, FLORIDA 34236	
	(City/ Sta	te and Zip Code)	
		@VERIZON.NET	ation)
For further informati	on concerning this matter, pleas	•	acouy
J. KEVIN DRAKE	: F80	941 > 954-775	50 X 412
(Name of Contact Person)		at ( <u>941</u> ) <u>954-775</u> (Area Code & Dayti	me Telephone Number)
Enclosed is a check t	for the following amount made p	eayable to the Florida Departmen	t 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)
Ame Divis P.O.	ing Address indirent Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FC 32301	r Circle

({(H11000056027 3)))

Articles of Amendment to Articles of Incorporation of

Portofino of Venice Land Condominium Association, Inc.

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

N05000011133

(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:

The new name must be distingutshable and abbreviation "Corp." or "Inc." "Company"	contain the word or "Co." may no	"corporation" or "inc t be used in the name.	corporated" or the
B. Enter new principal office address, if ap	plicable:	11523 PALM BRU	ISH TR #417
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS )	LAKEWOOD RAN	ICH, FL 34202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11523 PALM BRU	SH TR #417
		LAKEWOOD RANCH, FL 34202	
new registered agent and/or the new res		N DRAKE, ESQ.	_
Name of New Registered Agent:	J. KEVI	N DRAKE, ESQ.	
New Registered Office Address:		IRST STREET  ida street address)	_ <del>_</del>
New Register ou Office Mauress.		ing street agaress)	
•	·	ARASOTA	34236
	·	ARASOTA (City)	, Florida 34236 (Zip Code)
I hereby accept the appointment as register	S/	(City)	(Zîp Code)
I hereby accept the appointment as register	S/	(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as register position.	zing Registered A	(City)	(Zip Code)  pt the obligations of

If amending the Officers and/or Directors, enter the title and name of each officer/director bein	Z
removed and title, name, and address of each Officer and/or Director being added:	
(Auach additional sheets, if necessary)	

<u>Title</u>	Name	<u>Address</u>	Type of Action
PD	PAUL G. REYNOLDS	109 U.S. 41 BYPASS N. VENICE, FL 34285	☐ Add ☑ Remove
<u>VSTD</u>	MARK W. PAOLILLO	109 U.S. 41 BYPASS N. VENICE, FL 34285	□ Add ☑ Remove
D	TIMOTHY BEACH	109 U.S. 41 BYPASS N. VENICE, FL 34285	
(attach a	dditional sheets, if necessary). (Be sp	pecific)	
	mendment provides for an exchange, ons for implementing the amendmen		
( <i>if</i> 'r	not applicable, indicate N/A)		

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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)

Title	Name	Address	Type of Action
PD	FAUSTO PALOMBO	3800 STEELES AVE. W. #400 WOODBRIDGE, ONTARIO CANADA L4L 4G9	☑ Add □ Remove
<u>VSTD</u>	FABIAN BIANCHI	11523 PALM BRUSH TR #417 LAKEWOOD RANCH, FL 34202	☑ Add ☐ Remove
<u>D</u>	MARK LUCAS	11523 PALM BRUSH TR #417 LAKEWOOD RANCH, FL 34202	
E. If amending (attach addit	or adding additional Articles, enter coincide to the coincide of the control of t	hange(s) here: c)	
	- 4		
			·
· <del></del>			
		·	_

MAR-03-2011 16:33	DOOLEY & DRAKE	<b>9</b> 4195115Ø9 F
(((H1100005602	7 3)))	
- The date of each amendmen	(s) adoption: NOVEMBER 24, 2010	
	(date of adoption is req	quired)
Effective date if applicable:	(no more than 90 days after amen	dment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number roval.	of votes cast for the amendment(s)
There are no members or adopted by the board of di		(s). The amendment(s) was/were
Dated	November 24, 2010	
	10	
Signature_	2.7000	d pr 'f 3
hav	the chairman or vice chairman of the board or not been selected, by an incorporator — in er court appointed fiduciary by that fiduciar	f in the hands of a receiver, trustee, or
	FAUSTO PALOM	во
	(Typed or printed name of per	son signing)
	President/Director	
	(Title of person signing)	)

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