

12/6/2019 Dec. 6. 2019 2:29PM

Zimmerman, Kiser & Sutcliffe, P.A.

No. 2159X

P. 11

N0500012731

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.  
Account Number : I19990000006  
Phone : (407)425-7010  
Fax Number : (407)425-2747

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

Email Address: corporate@zkslawfirm.com

2019 DEC-6 Fri 9:05

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BELLA VIA AT PORT CHARLOTTE CONDOMINIUM ASSOCIATION,

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Amend

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BELLA VIA AT PORT CHARLOTTE CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N05000012731

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

Please return all correspondence concerning this matter to the following:

N. DWAYNE GRAY, JR., ESQUIRE

(Name of Contact Person)

ZIMMERMAN, KISER & SUTCLIFFE, P.A.

(Firm/ Company)

315 E. ROBINSON STREET, SUITE 600

(Address)

ORLANDO, FLORIDA 32801

(City/ State and Zip Code)

admin@wendovergroup.com

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

For further information concerning this matter, please call:

Jessica Snyder, Corporate Paralegal

(Name of Contact Person)

407

at

425-7010

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

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

**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. Moproc Street, Suite 810  
Tallahassee, FL 32303

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Articles of Amendment  
to  
Articles of Incorporation  
of

BELLA VIA AT PORT CHARLOTTE CONDOMINIUM ASSOCIATION, INC.

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

N05000012731

(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)

1105 Kensington Park Drive

Suite 200

Altamonte Springs, Florida 32714

C. Enter new mailing address, if applicable:(Mailing address MAY BE A POST OFFICE BOX)

1105 Kensington Park Drive

Suite 200

Altamonte Springs, Florida 32714

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:

N. DWAYNE GRAY, JR., ESQUIRE

315 E. Robinson Street, Suite 600

(Florida street address)

New Registered Office Address:

Orlando

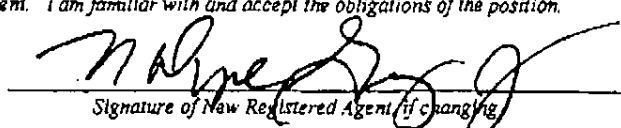
(City)

Florida 32801

(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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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 checked="" type="checkbox"/> Change <input type="checkbox"/> Add	President Director	Jonathan Wolf	1105 Kensington Park Drive Suite 200
<input type="checkbox"/> Remove	Secretary		Altamonte Springs, Florida 32714
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	Treasurer Director	Kenneth Lipson	1105 Kensington Park Drive Suite 200
<input type="checkbox"/> Remove			Altamonte Springs, Florida 32714
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		Joseph Millsap	
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			

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

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

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The date of each amendment(s) adoption: October 24, 2019, 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.

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.

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- ☐ 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 11/22/19

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)

Jonathan Wolf

(Typed or printed name of person signing)

manager

(Title of person signing)

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