

N06000004156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

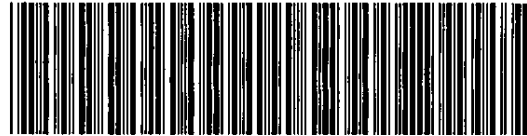
(Business Entity Name)

(Document Number)

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13 NOV 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
NOV 25 2013
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2013

JAN J. MCCLANAHAN / SOUTHWEST PROPERTY MANAGEMENT
13350 W. COLONIAL DRIVE SUITE 330
WINTER GARDEN, FL 34787

SUBJECT: ISLA BELLA ISLE, INC.
Ref. Number: N06000004156

We have received your document for ISLA BELLA ISLE, 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):

Please list the complete name of the company that is the registered agent. Also, the registered agent can not sign as the officer/director.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 013A00026062

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Isla Bella Isle, Inc.

DOCUMENT NUMBER: N06000004156

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

Please return all correspondence concerning this matter to the following:

Jan J. McClanahan

(Name of Contact Person)

Southwest Property Management

(Firm/ Company)

13350 W. Colonial Drive, Suite 330

(Address)

Winter Garden, FL 34787

(City/ State and Zip Code)

jan@swpmcfl.com

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

For further information concerning this matter, please call:

Jan McClanahan

(Name of Contact Person)

at (407) 656-1081

(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 &
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

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Isla Bella Isle, Inc.

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

N06000004156

(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)

Southwest Property Management of Central FL. Inc.
13350 W. Colonial Dr., Suite 330
Winter Garden, FL 34787

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Southwest Property Management of Central FL. Inc.
P O Box 783367
Winter Garden, FL 34778

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:

Southwest Property Management of Central FL. Inc.
13350 W. Colonial Dr., Suite 330

(Florida street address)

New Registered Office Address:

Winter Garden, Florida 34787

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am fully qualified and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>L. W. Lauro</u>	<u>5872 S. 900 E #100</u> <u>Salt Lake City, UT</u> <u>84121</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>Tom Prior</u>	<u>P O Box 783367</u> <u>Winter Garden, FL</u> <u>34778</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VPD</u>	<u>George Friedman</u>	<u>P O Box 783367</u> <u>Winter Garden, FL</u> <u>34778</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>STD</u>	<u>Scott Howard</u>	<u>P O Box 783367</u> <u>Winter Garden, FL</u> <u>34778</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

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

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

N/A

APPROVED
AND
FILED

The date of each amendment(s) adoption: N/A if other than the
date this document was signed.

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Effective date if applicable: October 22, 2013
(no more than 90 days after amendment file date)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 November 19, 2013

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)

Tom Prior

(Typed or printed name of person signing)

President

(Title of person signing)