## N0700008419

(Re	questor's Name)	)
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(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
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(Bu	isiness Entity Na	ime)
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Certified Copies	Certificate	es of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
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NO.7-07-02



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2007

DIANNE COSBY 8818 GOODBYS EXECUTIVE DR. JACKSONVILLE, FL 32217-4692

SUBJECT: ROYAL POINTE, INC. Ref. Number: N07000008419

We have received your document for ROYAL POINTE, 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):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6916.

Letter Number: 607A00068694

Carol Mustain Regulatory Specialist II

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Royal	Pointe, Inc.
DOCUMENT NUMBER: N07000	0008419
The enclosed Articles of Amendment and fee	are submitted for filing
÷	
Please return all correspondence concerning t	his matter to the following:
Barry B. Anbsbacher	
(Name of	Contact Person)
·	
Ansbacher & McKeel, P	
(Firm	n/ Company)
8818 Goodbys Executive	e Drive
(4	Address)
	•
Jacksonville, FL 322	
(City/ Sta	te and Zip Code)
For further information concerning this matte	r, please call:
Barry B. Anshacher or Dianne C	osby at (904 ) 737-4600
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	THIS HAS ALREADY BEEN SENT
Enclosed is a check for the following amount.	THIS HAS ADREAD! BEEN CENT
\$35 Filing Fee \$43.75 Filing Fee &	\$43.75 Filing Fee & \$52.50 Filing Fee
Certificate of Status	Certified Copy Certificate of Status (Additional copy is Certified Copy
,	enclosed) (Additional Copy
•	is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	Royal Pointe, Inc.	ALL 338	97
<u> </u>	(Name of corporation as currently filed with the Florida Dept. of State)	RETAR	) id 13
	; : N0700008419	SEE	
	(Document number of corporation (if known)	- 그낚	3
	the provisions of section 617.1006, Florida Statutes, this <i>Florida Not Fo</i> adopts the following amendment(s) to its Articles of Incorporation:		1:52
NEW CO	RPORATE NAME (if changing):		
	Royal Pointe Community Association, Inc.		
	the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of company" or "Co." may <u>not</u> be used in the name of a not for profit corporation)	f like im	ort in
	IENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Artic	ele	
Number(s)	and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)		
		····	
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			······
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(Attach additional pages if necessary) (continued)

The date o	f adoption of the amendment(s) was: September 27, 2007
Effective of	late if applicable:
	(no more than 90 days after amendment file date)
	·
Adoption	of Amendment(s) ( <u>CHECK ONE</u> )
	The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
_	There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Sig	nature
5.6	(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.)
	Barry B. Ansbacher
	(Typed or printed name of person signing)
	incorporator
	(Title of person signing)

FILING FEE: \$35