

N09 000004398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

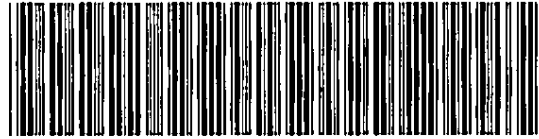
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JULIA A. GRIFFIN

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

Mirabay Village Shopping Center Owners' Association, Inc.  
**NAME OF CORPORATION:** \_\_\_\_\_

N09000004398  
**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Nichol Cox

\_\_\_\_\_  
(Name of Contact Person)

Root Company

\_\_\_\_\_  
(Firm/ Company)

275 Clyde Morris Blvd

\_\_\_\_\_  
(Address)

Ormond Beach, FL 32174

\_\_\_\_\_  
(City/ State and Zip Code)

nichol@rootorg.com

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

For further information concerning this matter, please call:

Gregory S. Radikopf

386

671-4924

at

\_\_\_\_\_  
(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 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. Monroe Street, Suite 810  
Tallahassee, FL 32303

# Root.

275 Clyde Morris Boulevard  
Ormond Beach, Florida 32174  
Tel 386 671 4888  
Fax 386 671 3888

December 8, 2021

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

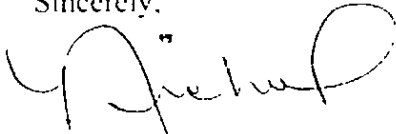
Re: Changes

To whom it does concern:

Please find enclosed our Articles of Amendment to Articles of Incorporation for Mirabay Village Shopping Center Owners' Association, Inc. (N09000004398), as well as our payment towards the filing fee via check #000629 in the amount of \$35.00.

If you have any questions or would like additional information, please do not hesitate to contact me directly at 386-671-4915.

Sincerely,



Nichol Cox  
Executive Administrative Assistant

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2021 DEC 13 PM 12:46

Mirabay Village Shopping Center Owners' Association, Inc.

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

N09000004398

(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:

275 Clyde Morris Blvd

(Principal office address MUST BE A STREET ADDRESS)

Ormond Beach, FL 32174

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

275 Clyde Morris Blvd

Ormond Beach, FL 32174

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:

Robert Campbell

275 Clyde Morris Blvd

(Florida street address)

New Registered Office Address:

Ormond Beach


(City)

Florida 32174

(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

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	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>D / P</u>	<u>Robert Campbell</u>	<u>275 Clyde Morris Blvd</u> <u>Ormond Beach, FL 32174</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>D / VP</u>	<u>Diane Larsen</u>	<u>275 Clyde Morris Blvd</u> <u>Ormond Beach, FL 32174</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D / S / T</u>	<u>Gregory S. Radikopf</u>	<u>275 Clyde Morris Blvd</u> <u>Ormond Beach, FL 32174</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>D / P</u>	<u>Geoffrey R. Langdon</u>	<u>c/o Alidade Mirabay, LLC</u> <u>36400 Woodward Ave, Suite 200</u>  <u>Bloomfield Hills, MI 48304</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>D / VP</u>	<u>Steven J. Faliski</u>	<u>c/o Alidade Mirabay, LLC</u> <u>36400 Woodward Ave, Suite 200</u>  <u>Bloomfield Hills, MI 48304</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>D / S / T</u>	<u>Robert L. Jones</u>	<u>c/o Alidade Mirabay, LLC</u> <u>36400 Woodward Ave, Suite 200</u>  <u>Bloomfield Hills, MI 48304</u>

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

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

N / A

☐ 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 12, 2021

Signature Gregory S. Radikopf  
(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)

Gregory S. Radikopf  
(Typed or printed name of person signing)

Director/Secretary/Treasurer  
(Title of person signing)