N10000006524

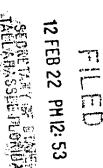
(Requestor's Name)
(Address)
(Address)
(
(0), (0), (177, 179, 199, 199, 199, 199, 199, 199,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
0.00
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, .

Office Use Only



400180711224

02/22/12--01014--020 **85.00



NC

FEB 2 3 2012 T. LEWIS



Cynthia Carlson

Akerman Senterfitt 9128 Strada Place Suite 10205 Naples, FL 34108 Tel: 239.449.5600 Fax: 239.449.5658

Dir: 239.449.5563 Dir Fax: 866.223.3046 cynthia.carlson@akerman.com

February 21, 2012

VIA FEDEX OVERNIGHT DELIVERY

Ms. Thelma Lewis Amendment Section, Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301

Re: Name Changes

Dear Ms. Lewis:

Thank you for speaking with me about the enclosed name changes. Please process them in the order indicated on the yellow sticky. I believe by doing it that way, we will end up with a non-profit organization named Naples Backyard History, Inc. and an LLC named Naples Historians, LLC. Please feel free to call me if you have any questions.

Sincerely,

Cynthia Carlson

Enclosures

Em 22 AM 7: 54

BOCA RATION DALLAS DENVER FORT LAUDERDALE JACKSONVILLE LAS VEGAS LOS ANGELES MADISON MIAMI NAPLES NEW YORK TO ORLANDO PALM BEACH SALT LAKE CITY TALLAHASSEE TAMPA TYSONS CORNER WASHINGTON, D.C. WEST PALM BEACH

COVER LETTER



TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Naples 1	listorians,	Inc.
DOCUMENT NUMBER: N1000000	6524	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Cynthia Carlson		
	(Name of Contact Pe	erson)
Akerman Senterfitt		
	(Firm/ Company)
9128 Strada Pl., Ste 20	5	
	(Address)	
Naples, FL 34108		
	(City/ State and Zip C	Code)
cynthia.carlson@	akerman.d	com
E-mail address: (to be use	ed for future annual rep	ort notification)
For further information concerning this matter, pleas	e call:	
Cynthia Carlson	_{at} 239	, 449-5563
(Name of Contact Person)		a Code & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida D	Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clif	eet Address endment Section ision of Corporations fron Building I Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

12 FEB 22 PM 12: 53

SEGRETARY OF STARF TATELAHASSEE PUCKEN

Naples Historians, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N10000006524 (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: Naples Backyard History, Inc. 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: Florida (City) (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.

Page 1 of 4

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: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove		_	
4) Change Add Remove	•		
5) Change Add Remove			
6) Change Add Remove			

If amending or adding adding adding adding adding attach additional sheets, if no	ecessary). (Be sp	pecific)		
				 · · · · · · · · · · · · · · · · · · ·
			·	

			····	
	, .			
186-2				
		· · · · · · · · · · · · · · · · · · ·		

The	The date of each amendment(s) adoption: 12/1/2011					
Effe	ective date if applicable:					
	(no more than 90 days after amendment file date)					
Ado	option 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(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 2/9/12					
	Signature Conthia Calson					
	(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)					
	Cynthia Carlson					
	(Typed or printed name of person signing)					
	Director					
	(Title of person signing)					