

N11 000006027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

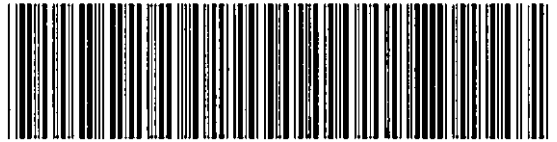
(Business Entity Name)

(Document Number)

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2019 AUG 19 PM 12:12

R. WHITE
AUG 14 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2019

LITHIA S BERGER
PO BOX 1173
MARCO ISLAND, FL 34146

SUBJECT: CAXAMBAS REPUBLICAN CLUB OF SOUTHWEST FLORIDA, INC.
Ref. Number: N11000006027

We have received your document for CAXAMBAS REPUBLICAN CLUB OF SOUTHWEST FLORIDA, 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):

Incomplete document. There are pages missing from the articles of amendment.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Catherine M Wood
Regulatory Specialist II

Letter Number: 419A00017631

COVER LETTER

TO: Amendment Section
Division of Corporations

Caxambas Republican Club of Southwest Florida, Inc.

NAME OF CORPORATION: _____

N11000006027

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Litha S. Berger

(Name of Contact Person)

Caxambas Republican Club of Southwest Florida, Inc.

(Firm/ Company)

PO Box 1173

(Address)

Marco Island, Florida 34146

(City/ State and Zip Code)

lithasberger@gmail.com

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

For further information concerning this matter, please call:

Litha S. Berger

954-594-1990

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 &
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

Articles of Amendment
to
Articles of Incorporation
of

Caxambas Republican Club of Southwest Florida, Inc.

2019: 19 FEB 12: 12

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

N11000006027

(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 Republican Club of South Collier County, Inc.

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.

1648 Windmill Avenue

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS) Marco Island, Florida 34145

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 1173

Marco Island

Florida 34146

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:

(City)

Florida

(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

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

[illegible]

The date of each amendment(s) adoption: _____, 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.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

August 14, 2019

Dated _____

Signature _____

Litha S. Berger

(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)

Litha S. Berger

(Typed or printed name of person signing)

Registered Agent & current Secretary

(Title of person signing)