

| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bu | siness Entity Nar | ne) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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September 27, 2016

CHARLES H "CHUCK" WEBB PO BOX 1849 ANNA MARIA, FL 34216

SUBJECT: AMI COMMUNITY DEVELOPMENT FUND, INC.

Ref. Number: N16000008215

We have received your document for AMI COMMUNITY DEVELOPMENT FUND, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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.

Rebekah White Regulatory Specialist II

Letter Number: 616A00020732

RECEIVED OCT 0 3 2016

original

RECEIVED OCT 17 2016

by us mail

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2016

CHARLES H "CHUCK" WEBB PO BOX 1849 ANNA MARIA, FL 34216

SUBJECT: AMI COMMUNITY DEVELOPMENT FUND, INC.

Ref. Number: N16000008215

We have received your document for AMI COMMUNITY DEVELOPMENT FUND, 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):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

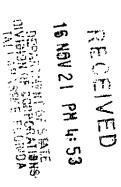
We are enclosing the proper form(s) with instructions for your convenience.

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.

Rebekah White Regulatory Specialist II

Letter Number: 316A00021712



COVER LETTER

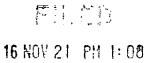
TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

| NAME OF CORPORATION: _ | MI Community Dev | relopment Fund, Inc | | |
|--|--|---|--|---|
| N160 DOCUMENT NUMBER: | 00008215 | | | |
| The enclosed Articles of Amendm | ent and fee are subm | itted for filing. | | |
| Please return all correspondence c | oncerning this matter | to the following: | | |
| Charles H. Webb | | | | |
| | (| Name of Contact Po | erson) | |
| Webb & Wells, P.A. | | | | |
| | | (Firm/ Company | y) | |
| P.O. Box 1849 | | | | |
| | | (Address) | | - |
| Anna Maria, FL 34216 | | | | |
| | (| City/ State and Zip | Code) | |
| E-mail | address: (to be used | for future annual rep | ort notification | n) |
| For further information concerning | this matter, please c | all: | | |
| Charles H. Webb | | at | 941 | 778-5934 |
| (Nam | e of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the follow | ng amount made pay | able to the Florida I | Department of | State: |
| | 43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee Certified Copy (Additional copy i enclosed) | Certif s Certif | 0 Filing Fee icate of Status ied Copy tional Copy is sed) |
| Mailing Address Amendment Sec Division of Corp P.O. Box 6327 | tion | An Di | reet Address nendment Sectivision of Corpo fron Building | |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



| ANT Community Development rund, mc. | | |
|--|---------------------------------------|---|
| (Name of Corporation as cu | irrently filed with the Flor | ida Dept. of State) |
| N16000008215 | | |
| (Document N | Number of Corporation (if ki | nown) |
| Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation: | tatutes, this Florida Not Fo | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corp | oration: | |
| name must be distinguishable and contain the word "cor | poration" or "incorporatea | The new " 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 ADDR | <u>ESS</u>) | |
| | | |
| | | AND A RESIDENCE OF THE SECOND |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| | · | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | enter the name of the |
| <u> </u> | nce address. | |
| Name of New Registered Agent: | | |
| | | |
| New Registered Office Address: | (FI | orida street address) |
| | · · · · · · · · · · · · · · · · · · · | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regist | | |
| I hereby accept the appointment as registered agent. I d | ım familiar with and accept | the obligations of the position. |
| | | |
| | Signature of New Regist | arad Agant if changing |
| | Signature Of New Regist | стей лусии, и спанувну |

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 X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Do Mike Jo Sally Sn | <u>nes</u> | |
|-----------------------------------|------------------------------|--------------------------------|--|--|
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | THE STATE OF THE S | ARITY OF THE PROPERTY OF THE P |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
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| 4) Change | | _ | · · · · · · · · · · · · · · · · · · · | |
| Add | | | | |
| Remove | | | | |
| 5) | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | - | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | | | |
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| The da | ate of each amendment(s) adop | tion: | , if other than the |
|---------|---|--|---------------------|
| late th | is document was signed. | | |
| Effect | ive date <u>if applicable</u> : | | |
| | | (no more than 90 days after amendment file date) | |
| | If the date inserted in this block ent's effective date on the Depar | does not meet the applicable statutory filing requirements, this date will nument of State's records. | ot be listed as the |
| Adopt | ion of Amendment(s) | (CHECK ONE) | |
| | he amendment(s) was/were adop/as/were sufficient for approval. | ted by the members and the number of votes cast for the amendment(s) | |
| | here are no members or members dopted by the board of directors. | s entitled to vote on the amendment(s). The amendment(s) was/were | |
| | Dated Sept. 14, 2016 | 18, 2016 | |
| | Signature | wlh. Carter | |
| | have not been s | n or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary) | |
| | Carol A. Ca | rter | |
| | | (Typed or printed name of person signing) | |
| | President/D | irector | |
| | • | (Title of person signing) | |

(Attachment)

Article 7. Purposes

The corporation is organized, and shall be operated exclusively for charitable, scientific and educational purposes, including but not limited to as:

A not-for-profit Corporation that acquires, owns, and manages an array of older (i.e., 50 years old and older) properties on Anna Maria Island (e.g., Bungalow and cottage - type properties) to provide the community with a new inventory of affordable annual and long-term rentals to encourage more individuals and families who work on Anna Maria Island to choose to live on the island. The availability of these affordable rental properties for individuals and families would help restore a sustainable population on Anna Maria Island, reversing a trend in recent years that has resulted in an older and less diverse island population. Fulfilling this objective would enhance the historical nature of Anna Maria Island as an eclectic and welcoming community. In addition, a growing population of resident families with school age children would contribute to the enrollment and diversity of Anna Maria Island's local elementary school. An increase in the on-island population would also increase the number of members and volunteers available to participate in the island's churches, civic organizations and community organizations, which in turn would enhance these organizations' capacity for programs and services as well as their fiscal sustainability. The overall impact of the AMI Community Development Fund, Inc. would be the revitalization of the Anna Maria Island community.