## N17000091084

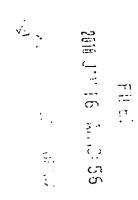
(Re	questor's Name)	
hbA)	dress)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

## NMCR OWNERS PROTECTIVE SOCIETY, INC

NAME OF CORPORATION:						
DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are subm	ned for filing.					
Please return all correspondence concerning this matter to the following:						
MICHAEL J BEHARRY						
(	Name of Contact Person)					
NMCR OWNERS PROTECTIVE SOCIETY						
	(Firm/ Company)					
6750 BEACH RESORT DRIVE #15						
	(Address)					
NAPLES, FL 34114						
(	City/ State and Zip Code)					
MIBEHARRY@GMAIL.COM						
E-mail address: (to be used	or future annual report notification)					
For further information concerning this matter, please of	dt:					
MICHAEL BEHARRY	440 915-7596 at					
(Name of Contact Person)						
Enclosed is a check for the following amount made pay	able to the Florida Department of State:					
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2664 Executive Center Circle					

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

2010 J.M. 15 AM 6: 56

ρſ NMCR OWNERS PROTECTIVE SOCIETY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N17000009684 (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: NMCR OWNERS SUPPORT GROUP, 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. NMCR OWNERS SUPPORT GROUP, INC. B. Finter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) 247 N COLLIER BLVD SUITE 212 MARCO ISLAND, FL 34145 C. Enter new mailing address, if applicable: NMCR OWNERS SUPPORT GROUP, INC. (Mailing address MAY RE A POST OFFICE ROX) PO BOX 2056 MARCO ISLAND, FL 34146-2056 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: (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:

F = 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>V</u> <u>Mil</u>	n Doe to Jones ly <u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
i) Change	PD	WAYNE VALENTINE	13355 SNOOK CIR
X Add	<del></del>		NAPLES, FL 34114
Remove			<del>.</del>
2) Change	<u>v</u>	THOMAS LOVE	13426 LADYFISH LN
X Add			NAPLES, FL 34114
Remove	ďΓ	MICHAEL J BEHARRY	6750 BEACH RESORT DR #15
3) Change X Add	<del></del>		NAPLES, FL 34114
Remove			
4) X Change	S	MICHAEL J BEHARRY	6750 BEACH RESORTR DR #15
Add			NAPLES, FL 34114
Remove			
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)					
SEE ATTACHED:					
-					
-					
	· · · · · · · · · · · · · · · · · · ·				

— *Purpose*: NMCR Owners Support Group, Inc. is organized exclusively for the mutual benefit of lot owners of the Naples Motorcoach Resort (excluding lots owned by the developer or its employees).

The purpose of this corporation is:

- to support and conduct research, education, and informational activities to increase lot owners' awareness of their rights and obligations under the Governing Documents of the Naples RV Resort, LLC and the bylaws of its HOA; and to seek legal counsel regarding such matters; and
- · to bring such action as required to protect lot owners' rights; and
- to manage funds raised for the mutual benefit of the all lot owners.

Che	date of each amendment	(8) adoption:	, if other than the
late	this document was signed		
		JANUARY 7, 2018	
:/[t	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will no no Department of State's records.	ot be listed as the
\de	ption of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/wwas/wore sufficient for a	rere adopted by the members and the number of votes east for the amendment(s) inproval.	
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were firectors.	
	01/07 Dated	/2018	
	21Euran - 15-	Vaga Chalantst	
	have r	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	W	AYNE VALENTINE	
		(Typed or printed name of person signing)	
	l'R	ESIDENT	
	<del></del>	(Title of person signing)	