# 1180000000194

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(A	ddress)		•
(C	ity/State/Zip/Phone #	<i>f</i> )	-
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name	<del>)</del>	-
	•		
(D	ocument Number)		-
Certified Copies	Certificates o	f Status	
Special Instructions to	Filing Officer:		





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Amend

MAR 2 8 2018

I ALBRITTON

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Concerned Citizens of ON:	f Hidden River			
DOCUMENT NUMBER:	N18000000194				
	•				
The enclosed Articles of Am	nendment and fee are subm	litted for filing.			
Please return all corresponde	ence concerning this matter	to the following:			
Linda J Dickson					
		Name of Contact Pe	rson)		
Concerned Citizens of Hidd	en River				
		(Firm/ Company	)		
4610 Hidden River Road					
		(Address)			
Sarasota FL 34240					
	(	City/ State and Zip (	Code)		
cchr2018@gmail.com					
E	-mail address: (to be used	for future annual rep	ort notification	n)	
For further information conc	erning this matter, please o	all:			
Linda J Dickson		at	941	224-1337	
	(Name of Contact Person)		(Area Code)	(Daytime Telepho	ne Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of S	State:	
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	3\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing	ddmoor	C4			

#### 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



## Concerned Citizens of Hidden River 4610 Hidden River Road Sarasota FL 34240 941-737-4921

March 23, 2018

Amendment Section
Division of Corporatoins
PO Box 36327
Tallahassee FL 32314

Re: Amended Registered Agent of the Corporation

To Whom It May Concern:

Please find enclosed a corrected filing to amend the registered agent of the Corporation.

Previously a check of \$25 filing fee was submitted and not returned to the Concerned Citizens of Hidden River.

An additional \$10 filing fee is included with this letter.

Please accept my apologies for the prior filing mistake.

Regards,

Linda J Dickson, Secretary CCHR

ref N18000000194

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18 MAR 26 PH 4: 00

SECRETARY OF STATE



March 15, 2018

LINDA J. DICKSON CONCERNED CITIZENS 4610 HIDDEN RIVER ROAD SARASOTA, FL. 34240

SUBJECT: CONCERNED CITIZENS OF HIDDEN RIVER, INC.

Ref. Number: N18000000194

We have received your document for CONCERNED CITIZENS OF HIDDEN RIVER, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Pages 2 and 3 are missing.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 718A00005232



March 2, 2018

LINDA J. DICKSON CONCERNED CITIZENS OF HIDDEN RIVER INC 4610 HIDDEN RIVER ROAD SARASOTA, FL 34240

SUBJECT: CONCERNED CITIZENS OF HIDDEN RIVER, INC.

Ref. Number: N18000000194

We have received your document for CONCERNED CITIZENS OF HIDDEN RIVER, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Non-Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 718A00004340

# Articles of Amendment to Articles of Incorporation of

Concerned Citizens of Hidden River

(Name of Corporation	as currently filed	with the Florida Dept.	of State)	
N18000000194				
(Docur	nent Number of Co	rporation (if known)		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this F	Slorida Not For Profit Co	orporation adopts th	ne following
A. If amending name, enter the new name of the	e corporation:			
				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		"incorporated" or the al	bbreviation "Corp.	
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>				
			roand	
C Enter new mailing address if applicables			た。	<u>70</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )		25 \$10 22 (77)	
			Co.	25
	<del></del>		res -	7 7
				<del>ق</del> خ
D. If amending the registered agent and/or regi		ess in Florida, enter the	name of the	TO OT
new registered agent and/or the new register	ed office address:		7.5	C.
Name of New Registered Agent:	John Agnelli			
	4610 Hidden Rive	er Road		
Non Positional Office Address		(Florida street a	ıddress)	
New Registered Office Address:	_		24240	
	Sarasota		, Florida	
	(City,	)	(Zip Code)	
New Registered Agent's Signature, if changing l				
I hereby accept the appointment as registered ager	nt. I am familia <del>r w</del>	ith and accept the obliga	tions of the position	1.
		Je ago	rll	
-	Signature	of New Registered Agen	t, 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jos Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change	<del> </del>	_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
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Add Remove				
5) Change		_	<del> </del>	
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or addi (attach additional she	ets, if necessary). (Be	e specific)	more.		
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	date of each amenda this document was sig	( )	if other than the
Effe	ective date <u>if applicab</u>	le: (no more than 90 days after amendment file date)	
		in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	listed as the
Ado	ption of Amendment	(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were sufficient for	as/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
	There are no member adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	Dated 3/	22/2018	
	Signature	Linai of white	
	ha	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)	
		Linda J Dickson	
		(Typed or printed name of person signing)	
		Secretary	
		(Title of person signing)	