

N19 0000 11806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

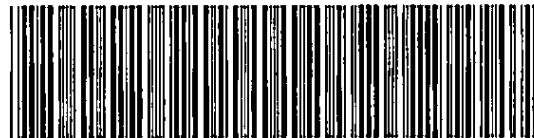
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

file an amend. 4076

Office Use Only



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RECEIVED
2021 DEC 20 PM 2:53
CLERK OF SUPERIOR COURT
JANUARY 2022

Amend/Name Change

JAN 27 2022

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SEASCAPE
~~KEYSTONE~~ RESIDENT COUNCIL
Name of Corporation

DOCUMENT NUMBER: N19000011806

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Giandola
Name of Contact Person

Firm/Company

3490 Thrive Drive, Apt. 289
Address

Naples, FL 34105
City/State and Zip Code

bgnnaples@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

same at (239) 530-7401
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35.00 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2021 DEC 09 PM 12:39

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2021

WILLIAM GIANOLA
3490 THRIVE DRIVE, APT 289
NAPLES, FL 34105

SUBJECT: KEYSTONE RESIDENT COUNCIL INC.
Ref. Number: N19000011806

We have received your document for KEYSTONE RESIDENT COUNCIL 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 821A00029675

Articles of Amendment
to
Articles of Incorporation
of

Keystone Resident Council Inc.

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

N19000011806

(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:

Seascape Resident Council 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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3490 Thrive Drive #289

Naples, FL 34105

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

same

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:

William Giandola

3490 Thrive Drive, Apt. 289

(Florida street address)

New Registered Office Address:

Naples

(City)

Florida

34105

(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.

William Giandola

Signature of New Registered Agent, if changing

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FILED

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Viggo Carstensten</u>	<u>3490 Thrive Drive #287</u> <u>Naples, FL 34105</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Naney Walker</u>	<u>3490 Thrive Dr #364</u> <u>Naples, FL 34105</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>William Gianola</u>	<u>3490 Thrive Dr. #289</u> <u>Naples, FL 34105</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

☐ 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 12-14-2021

Signature William Gianola

(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)

William Gianola
(Typed or printed name of person signing)

President
(Title of person signing)