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COACH HOMES III ON MONTELANICO AT ESPLANADE

CONDOMINIUM ASSOCIATION, INC.

TYPE OF FILING: AMENDMENT

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI		On Montelanico at E	splanade Cor	ndominium Association, Inc.
DOCUMENT NUMBER:	N20000001833			
The enclosed Articles of Ar	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matte	er to the following:		
Sharon K. Gray				
	·	(Name of Contact Po	rson)	
Triad Professional Service	es			
		(Firm/ Company	)	•
1720 Windward Concour	se, Ste. 390			
<u> </u>		(Address)		
Alpharetta, GA 30005				
		(City/ State and Zip (	Code)	
sgray@triadpros.com				
1	-mail address: (to be used	for future annual rep	ort notification	1)
For further information con-	cerning this matter, please	call:		
Sharon K. Gray		at	770	777-2091
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the t	ollowing amount made pa	tyable to the Florida D	Department of S	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

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

## Articles of Amendment to Articles of Incorporation of

COACH HOMES III ON MONTELANICO AT ESPLANADE CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as curren	tly filed with the Florida Dept. o	of State)
N20000001833		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Floridu Not For Profit Co</i>	rporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
		Тће неч
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the ab	obreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	28100 Bonita Grande Dr.	2020 SEC ***********************************
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 102	HAY ALLA
	Bonita Springs, FL 34135	3388 1388 14-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	28100 Bonita Grande Dr.	## 8:
	Suite 102	50
	Bonita Springs, FL 34135	
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a	e address in Florida, enter the i	name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	ddress)
- Control of the Cont		
<del></del>	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fan		ions of the position.
Si	gnature of New Registered Agent,	. if changing

Page 1 of 4

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 not a change, Mike Jones Mike Jones, V as Remo	leaves the corporat	ion, Sally Smith is named the V and S. Th	the PST and Mike Jones is listed as the Keese should be noted as John Doe, PT as	Shange,
Example: XChange X Remove X Add	PT John I V Mike SV Sally	Jones		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address OR	e. 
Change Add XX Remove	PD	Carl Senice	551 N CATTLMEN ROAD, SUITE 200 SARASOTA, FL 34232	
2) Change Add	PD	Valerio McChesney	28100 Bonita Grande Dr., Stc. 102 Bonita Springs, Fl. 34135	
Remove 3) Change Add Remove	VPTO	Robert Price	551 N CATTLMEN ROAD, SUITE 200 SARASOTA, FL 34232	
4) Change Add Remove	VPTD	Rebekah Norton	28100 Bonita Grande Dr., Ste. 102 Bonita Springs, FL 34135	
5) W Change Add Remove	VP	Barbara Kininmonth	28100 Bonita Grande Dr., Ste. 102 Bonita Springs, FL 34135	•
6) Change Add Remove	<del></del>			
	ling additional Ar eets, if necessary).	ticles, enter chunge(s) here: (Be specific)		

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	03/43/2000	
The date of each amendment(s) adoption:		if other than the
date this document was signed.		
Effective date if applicable:	o more than 90 days after amendment file date)	
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does redocument's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Signature  (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)  Valerie McChesney
(Typed or printed name of person signing)
President and Director
(Title of person signing)

2020 MAY -4 AM 8: | 1