

N200000007073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

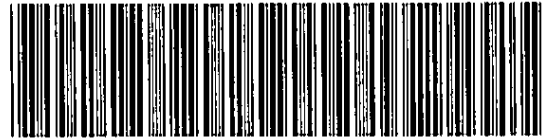
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS

1/10/22

Office Use Only



900375045539

10/18/21--01047--003 **35.00

FILED
2022 JAN 10 AM 11:05
STATE OF TEXAS
FBI



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2021

ALEXANDER D. GONANO
1600 SOUTH US HIGHWAY 1
SUITE 200
FORT PIERCE, FL 34950

SUBJECT: ST. LUCIE COUNTY BAR ASSOCIATION, INC.
Ref. Number: N22530

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

In order to file an amendment, the entity must be active on our records. A voluntary dissolution was filed on 04/27/2021. Articles of Revocation of Dissolution can only be filed within 120 days from the date the Articles of Dissolution were filed. This document cannot be filed because the 120-day period has expired.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 221A00026344

Law Offices
of
GONANO & HARRELL
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
ATTORNEYS AND COUNSELORS AT LAW

RECEIVED

2022 JAN 10 PM 3:18

DOUGLAS E. GONANO
Board Certified Real Estate Lawyer
email: dgonano@gh-law.com

T'D BANK BUILDING
1600 South Federal Highway, Suite 200
Fort Pierce, Florida 34950-5178
Telephone (772) 464-1032
Facsimile (772) 464-0282

DANIEL B. HARRELL
Board Certified in Education Law
email: dharrell@gh-law.com

LEGAL ASSISTANT TO ZAN GONANO
LINDA M. CARTER
email: lcarter@gh-law.com

ALEXZANDER "ZAN" GONANO
Attorney at Law
Email: agonano@gh-law.com

LEGAL ASSISTANT TO ZAN GONANO
RENEE LOGAN
email: rlogan@gh-law.com

January 6, 2022

Ms. Querida Silas
Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: St. Lucie Bar Ass Inc N20000007075

Dear Ms. Silas:

I spoke to your supervisor via phone today. In October, I sent in an amendment for St. Lucie County Bar Assn (Document number N22530) along with the \$35 payment, which was returned to me. I was actually supposed to send in an amendment for St. Lucie Bar Ass Inc (document number N20000007075). I did in fact send in the amendment on 11/8/2021 for St. Lucie Bar Assn Inc, but it was apparently never received by your office. I am returning the amendment for St. Lucie Bar Assn Inc for processing. If you have questions or require anything additional, please contact my office. Many thanks!!

Thank you.

Cordially,

/s/ *Linda M. Carter*

Linda M. Carter, Legal Assistant to
Alexzander D. Gonano, Esquire

Enclosure

COVER LETTER

TO: Amendment Section
Division of Corporations

RECEIVED

NAME OF CORPORATION: St Lucie Bar Association, Inc.

2022 JAN 10 PM 3:18

DOCUMENT NUMBER: N20000007075

SECRETARY OF STATE
TALLAHASSEE, FL

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexzander D. Gonano

(Name of Contact Person)

Gonano & Harrell

(Firm/ Company)

1600 South US Highway 1 Suite 200

(Address)

Fort Pierce, FL 34950

(City/ State and Zip Code)

agonano@gh-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexzander D. Gonano

772

464-1032 x1014

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

FILED

St. Lucie Bar Association, Inc.

2022 JAN 10 AM 11:05

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

N20000007075

SECRETARY OF STATE
TALLAHASSEE, FL

(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:

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:

1600 South US Highway 1 Suite 200

(Principal office address **MUST BE A STREET ADDRESS**)

Fort Pierce, FL 34950

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1600 South US Highway 1 Suite 200

Fort Pierce, FL 34950

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:

Alexzander D. Gonano, Esq.

1600 South US Highway 1, Suite 200

(Florida street address)

New Registered Office Address:

Fort Pierce

(City)

Florida 34950

(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:

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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>RA/P</u>	<u>Ryan Reif</u>	<u>1660 SW St. Lucie West Blvd 300</u> <u>Port Saint Lucie, FL 34986</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP to P</u>	<u>Alexzander D. Gonano, Esq.</u>	<u>1600 South US Highway 1 Suite 20</u> <u>Fort Pierce, FL 34950</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Ian Osking</u>	<u>PO Box 1270</u> <u>Fort Pierce, FL 34954</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Taylor Kennedy, Esq.</u>	<u>756 Beachland Blvd</u> <u>Vero Beach, FL 32963</u>
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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 9/1/21
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ 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 11/8/2021

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)

Alexzander D. Gonano

(Typed or printed name of person signing)

President

(Title of person signing)