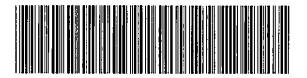
N21000007364

(Re	equestor's Name)	
(Ad	ddr e ss)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone	e #)
·	•	,
PICK-UP	☐ WAIT	MAIL
	usiness Entity Nar	nel
الله)	ISINESS CHARY MAI	ile)
		
(Ud	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
Opecial instructions to	rining Officer,	

Office Use Only



800414194278

09/08/23--01011--007 **35.00

263 352 -6 6712: 32

a

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATE	Del Webb Naples W ON:	fine Club, Inc.				
DOCUMENT NUMBER:	N21000007364					
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this matt	er to the following	:			
Nancy Frierson						
	-	(Name of Contact	Person)		. <u>.</u>	
Del Webb Naples Wine Clu	ıb, Inc					
		(Firm/ Comp	any)			
6503 Holiman Way						
		(Address)			
Ave Maria, FL 34142						
		(City/ State and Z	ip Code)			
letitbreeze.nf@gmail.com						
<u>F</u>	-mail address: (to be use	d for future annual	report no	tification	1)	
For further information con-	cerning this matter, please	e call:				2
Nancy Frierson			913 at		707-8487	23 SE
	(Name of Contact Person	1)		Code)	(Daytime Telepho	one Number)
Enclosed is a check for the	following amount made p	ayable to the Flori	da Depart	ment of	State:	. రా ప
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)	

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

Del Webb Naples Wine Club, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N21000007364 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY <u>BE A POST OFFICE BOX</u>) 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: , Florida (City) (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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally St	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>VP</u>	Bruce Edgar	6526 Holiman Way Ave Maria, FL 34142
2) Change:	<u>S</u>	Marjorie St. Pierre	6506 Holiman Way Ave Maria, FL 34142
X Remove 3) Change Add Remove	<u>S</u>	Mariella Barlow	Ave Maria, FL 34142
4) Change Add	<u>P</u>	Nancy Frierson	6503 Holiman Way Ave Maria, FL 34142
Remove 5)ChangeAdd	<u>T</u>	Lisa Howard	6502 Holiman Way Ave Maria, FL 34142
6) Change X Add Remove	Committee Becial	Mac Zagami	5968 Prosperity Lane Ave Maria, FL 34142
		icles, enter change(s) here: (Be specific)	

	· · · · · · · · · · · · · · · · · · ·	
	······································	
		
· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	-	
	-	
·		
		.
		
		111 62
		्र हो। हैं। ()
		ب
		FA12: 32
		₹ 5
		그는 중
		1 ' '
The date of each amendment(s) adoption:		_, if other than the
date this document was signed.		
Effective date if applicable:		<u> </u>
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not of State's records.	be listed as the
Adoption of Amendment(s) (9	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)	

adopted by the boar	August 29, 2023
Dated	
Signature	Gisa N. Howard
	By the chairman or vice chairman of the board, president or other officer-if directors
I	have not been selected, by an incorporator - if in the hands of a receiver, trustee, or
(other court appointed fiduciary by that fiduciary)
	Lisa A. Howard
	(Typed or printed name of person signing)
	Treasurer

(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were