

N21000007364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

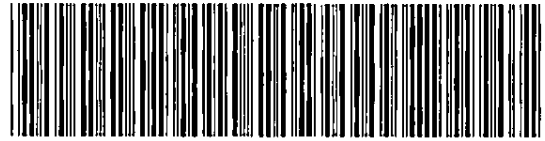
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2023

M A E

MAC ZAGAMI
5968 PROSPERITY LANE
AVE MARIA, FL 34142

SUBJECT: DEL WEBB NAPLES WINE CLUB, INC.
Ref. Number: N21000007364

We have received your document for DEL WEBB NAPLES WINE CLUB, 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):

The form you submitted is for a LLC, but your entity is a Florida not for profit corporation. Please complete and return the enclosed blank form(s).

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.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 123A00028283

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DEL WEBB NAPLES WINE CLUB

DOCUMENT NUMBER: N21000007364

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

Please return all correspondence concerning this matter to the following:

MAE ZAGAMI
(Name of Contact Person)

(Firm/ Company)

5968 PROSPERITY LANE
(Address)

AVE MARIA, FL 34142
(City/ State and Zip Code)

MAEZAGAMI@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAEZAGAMI at (978)764-0576
(Name of Contact Person) (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

DELWEBB NAPLES WINE CLUB
(Name of Corporation as currently filed with the Florida Dept. of State)

N2100000 7364
(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:
(Principal office address MUST BE A STREET ADDRESS)

5968 PROSPERITY LANE
AVE MARIA, FL 34142

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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: MAE ZAGAMI

5968 PROSPERITY LANE
(Florida street address)

New Registered Office Address:

AVE MARIA, Florida 34142
(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.

Mae Zagami
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>

Type of Action (Check One)	Title	Name	Address
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- | | | | |
|--|------------------|----------------------------|---|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>PRESIDENT</u> | <u>NANCY FRIERSON</u> | <u>6503 HOLIMAN WAY</u>
<u>AVE MARIA FL 34142</u> |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>PRES.</u> | <u>MAE ZAGAMI</u> | <u>5968 PROSPERITY LA.</u>
<u>AVE MARIA FL 34142</u> |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>TREASURER</u> | <u>LISA HOWARD</u> | <u>6502 HOLIMAN WAY</u>
<u>AVE MARIA FL 34142</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>TREASURER</u> | <u>ROBERT BOLDT</u> | <u>6486 HOLIMAN WAY</u>
<u>AVE MARIA FL 34142</u> |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>SECRETARY</u> | <u>MARJORIE ST. PIERRE</u> | <u>6506 HOLIMAN WA</u>
<u>AVE MARIA FL 34142</u> |
| 6) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>SECRETARY</u> | <u>KIRK SCHWAN</u> | <u>5821 MAYFLOWER WA</u>
<u>AVE MARIA FL 34142</u> |

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

ADD VICE PRESIDENT DEBORAH DROTAR
5948 MAYFLOWER WAY
AVE MARIA FL 34142

The date of each amendment(s) adoption: 1-1-24, if other than the date this document was signed.

Effective date if applicable: 1-1-24
(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 12.20.23

Signature Mae Zagami
(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)

MAE ZAGAMI
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)