

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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April 19, 2016

RANDY SCHIEFER 1913 RUE LA FONTAINE NAVARRE, FL 32566

SUBJECT: LA FONTAINE HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N92000000217

We have received your document for LA FONTAINE HOMEOWNERS ASSOCIATION, 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):

You have submitted two documents under one filing fee. Please choose one to file and resubmit or remit an additional filing fee of \$35.00 to fileboth. It is recommeded that you only file articles of amendment, as that form will change the registered agent also.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(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.

Rebekah White Regulatory Specialist II

Letter Number: 016A00008106

· COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: La Fontaine Homeowners association
DOCUMENT NUMBER: AA 672 943
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Randy Schiefer Name of Contact Person
La Fontaine Homeowners association
1913 Rue La Fontaine Address
Navarie, FL 32566 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (937) 902-6011 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Arti	icles of Amendment
Artic	to ED
Aine	
La Fontaine 1	Home owners Association
· · · · · · · · · · · · · · · · · · ·	
	rently filed with the Florida Dept. of State)
<u> </u>	672 943
(Document Nur	umber of Corporation (if known)
ursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
. If amending name, enter the new name of the corpor	ration:
	The new
	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
Company" or "Co." may not be used in the name.	
Enter new principal office address, if applicable:	1913 Rue La Fontaine
rincipal office address <u>MUST BE A STREET ADDRES</u>	_
	Navarre, re
	32566
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	8668 Nowarie Pkwa # 3:
•	
	Mavarie, TL
	32566
If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	andy Schiefer
1	913 Rue La Fontaine
- \	(Florida street address)
New Registered Office Address:	
\sim	Dowarre Florida 32566
	(City) (Zip Code)
on Dagistared Agent's Signature if sharein Dagistare	and A mout.
ew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	to Agent: a familiar with and accept the obligations of the position.
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	286

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: X Change X Remove X Add		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add Remove	PE	Greg Fountain	1901 Rue La Fontaire Nœuarre, FL 32566
2) X Change Add Remove	PE		2003 Fontaine planet Navarre, FL 32566
3) Change Add Remove	<u>_V</u>	John McAlpin	1991 Fontainebloom of Neware, FL 32564
4) Change Add Remove	<u>5 T</u>	Rondy Schicfer	1913 Rue La Fortaine Navarre, FL 32566
5) Change Add Remove			
6) Change Add Remove			

If amending or attach addition	adding addi	itional Arti ecessary).	cles, enter char (Be specific)	ige(s) here.				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file dat	'e)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast fo was/were sufficient for approval.	r the amendment(s)
There are no members or members entitled to vote on the amendment(s). The amenda adopted by the board of directors.	ment(s) was/were
Dated 12 APRIL 2016	
Signature Cost	
(By the chairman or vice chairman of the board, president or other chave not been selected, by an incorporator – if in the hands of a recother court appointed fiduciary by that fiduciary)	
DAVID J. ARMITAGE	
(Typed or printed name of person signing	ng)
PRESIDENT LA FINTHINE HOA	
(Title of person signing)	