## N99 000005417

(Req	uestor's Name)	· · · · ·
(Addi	ess)	<u>.</u>
•	,	
(Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



200392603422

08/12/22--01032--002 ++35.00

2022 AUS 12 TOT 3: 14

RA Crond

NOV 2 9 2021 D CUSHING

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Friends of the Naples Municipal Airpor Name of Corporation	t Inc	
DOCUMENT NUMBER: N99000005417		
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:	
Elinor V. Krier		
Name of Contact Person		
EK Consulting, Inc.		
Firm/Company		
3200 Bailey Lane, Suite 199		
Address	<del></del>	
Naples, FL 34105		
City/State and Zip Code	-	
ellie@eke-inc.com		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, p	at (239 )262-0015 7 Area Code & Daytime Telephone Number	
Elinor V. Krier	at (239 )262-0015	
Name of Contact Person	Area Code & Daytime Telephone Number	
	. 19	
Enclosed is a \$35.00 check made payable to the Department of State.		
	\$ A	
Mailing Address	Street Address:	
Mailing Address: Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corp	)502, 617,0502, 607,1508, or 617,1508, Florida Statutes, thi oration organized under the laws of the State of <mark>Florida</mark>	<i>S</i>
1. The name of t	the corporation: Friends of t	he Naples Municipal Airport Inc	
		Lane, Suite 199, Naples, FL 34105	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 9/10/	Document number: N99000005417	
	d street address of the currer rtment of State: (If resigned	nt registered agent and registered office on file with the	
	Bass Law Office PA - Resig	gned	
6. The name and (if changed):	d street address of the new r	registered agent (if changed) and /or registered office	2022
	3200 Bailey Lane, Suite 199	)	:-
	Naples, FL 34105	P.O. Box. NOT acceptable	ري 2 - دې
The street address changed will	ess of its registered office a be identical.	and the street address of the business office of its registered	• -
Such change wa authorized by the	as authorized by resolution he board, or the corporation	duly adopted by its board of directors or by an officer son has been notified in writing of the change.	
R. Scott	- Cameron	R. Scott Cameron	
Signatu	ire of an officer or director	Printed or typed name and title	
I further agree of my duties, an document is bei	the appointment as registe to comply with the provision ad I am familiar with and a ing filed merely to reflect a s been notified in writing o	ered agent and agree to act in this capacity.  ons of all statutes relative to the proper and complete perforcept the obligation of my position as registered agent. () a change in the registered office address. I hereby confirm of this change.	ormance or if this that the
7.4	in Vikre	8/8/2022	
Sig	malure of Registered Agent	!Date	
If signing on be	chalf of an entity:		
Elinor V. Krier			
Т	yped or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*