# 525913

(Deminetor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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### **COVER LETTER**

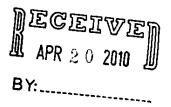
**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION: Develope	ment Associates of Bonita Springs	, Inc.
DOCUMENT NU	MBER:	S25913	<del></del>
The enclosed Artic	les of Amendment and fee ar	re submitted for filing.	
Please return all co	rrespondence concerning this	s matter to the following:	
		arles F. Maurer, Jr.	_
	Na	ame of Contact Person	
	Development As	sociates of Bonita Springs, Inc.	<del></del>
		гити Сотрану	
-	F	PO Box 366069 Address	_
		, Marver	
-		a Springs, FL 34136 ty/ State and Zip Code	_
	accounting@dev E-mail address: (to be used	relopmentassociates.com  Tor future annual report notification)	
For further informa	tion concerning this matter, p	please call:	
Chai	les F. Maurer, Jr.	at ( 239 ) 992 9611 ext.	
Enclosed is a check	for the following amount ma	ade payable to the Florida Department of St.	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	(Additional copy is enclosed) Certified	ate of Status
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2010



Charles F. Maurer, Jr. Development Associates of Bonita Springs P.O. Box 366069 Bonita Springs, FL 34136

SUBJECT: DEVELOPMENT ASSOCIATES OF BONITA SPRINGS, INC.

Ref. Number: S25913

We have received your document for DEVELOPMENT ASSOCIATES OF BONITA SPRINGS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The document must have original signatures.

Mr is not an acceptable title for an officer. You may add William Wolf as a president, vice president, secretary, treasurer, director etc.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 210A00008978



#### Articles of Amendment to Articles of Incorporation of

FILED

	of	2010 APR 30 AM 11: 37
Development Assoc	iates of Bonita Spri	ngs, Inc. SECRETARY OF STATE AHASSEE, FLORIDA
(Name of Corporation as curr	ently filed with the Florid	a Dept. of State AHASSEFF STATE
		<del></del>
(Document Nun	nber of Corporation (if kno	wn)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	lorida Profit Corporation adopts the following
A. If amending name, enter the new name o	f the corporation:	
		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc	," or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BUX</u> )	
D. If amending the registered agent and/or new registered agent and/or the new registered.		n Florida, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street d	nddress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of		and accept the obligations of the position.
	Signature of New Registere	d 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Michael Maurer	605 Corbel Drive Naples, FL 34110	
<u>VP</u>	William Wolf	8880 Colonnades Court W421 Bonita Springs, FL 34135	
(attach a	dditional sheets, if necessary). (	(Be specific)	
<u>provisi</u>		inge, reclassification, or cancellation of iment if not contained in the amendme	

The date of each amendment	
1766-44 J-4- 16111-1	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
• · · · · ·	•
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	."
•	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	12 April 10
Signature(By	y a director, president or officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Charles F. Maurer, Jr.
	(Typed or printed name of person signing)
	President
	(Title of person signing)
	• • •