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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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2010 FEB -4 AM 9: 16

SECRETARY OF STATE

2/8/10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NSB H	igh School Dug	out Club Inc
DOCUMENT NUM	BER: NO 6 0000	10796	
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Cynthia Lyb (Name of	Contact Person)	
	CM Lybran (Firm	d + Ce. LLC. n/Company)	
<u> </u>	728 Canal S	Address)	
	(Out) bu	cfl-r-cem	
For further information	on concerning this matter, pleas		,
Cynthia (Name	of Contact Person)	at (<u>386</u>) <u>428</u> (Area Code & Dayti	mc Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	nt of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle

Articles of Amendment to Articles of Incorporation of

2 F/1
RISECRE 4 LEO
ALLAHASSEOUS 9: 16
MECRETARY AM 9: 16 (nc (state)

4 · •	OI .		ASSO OF
NSB High Sch	ogl Dugent		Inc. CE. CORIOS
N 0 6 00	0010796	,	
	ber of Corporation (if kr	iown)	
ursuant to the provisions of section 617.1006, Inc. following amendment(s) to its Articles of Inc.		rida Not For Proj	<i>fit Corporation</i> adopt
. If amending name, enter the new name of	the corporation:		
NSB Dugget	Club Inc		
The new name must be distingui shab le and coabbreviation "Corp." or "Inc." "Company" or	intain the word "corpor	ration" or "incorp in the name.	porated" or the
3. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u> 1			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>			
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:		in Florida, enter	the name of the
New Registered Office Address:	(Florida stree	(address)	
-	(City)		, Florida (Zip Code)
			(Eq. Conc)
New Registered Agent's Signature, if changin hereby accept the appointment as registered position.		with and accept	the obligations of th

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)

<u>Title</u> Name <u>Address</u> Type of Action ☐ Add ☐ Remove Remove __ 🔲 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption	12/30/2009
Effective date if applicable:	(date of adoption is required)
(no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
There are no members or members ent adopted by the board of directors.	itled to vote on the amendment(s). The amendment(s) was/were
Dated 01 26 P	Muller
(By the chairma have not been s	on or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, obinted fiduciary by that fiduciary)
<u> </u>	Alan Weaver (Typed or printed name of person signing)
Vi	ce President Director (Title of person signing)