

N11000000 8460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

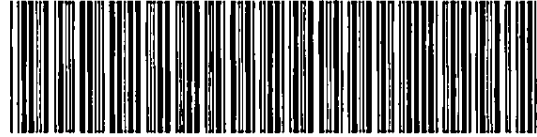
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Amend

OCT 24 2019

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Patriot Riders of America Inc. Chapter One Port Charlotte, Florida

DOCUMENT NUMBER: N11000008460

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

Please return all correspondence concerning this matter to the following:

David Saunders

(Name of Contact Person)

Patriot Riders of America Inc Chapter One Port Charlotte Florida

(Firm/ Company)

PO Box 380993

(Address)

Port Charlotte, FL 38938

(City/ State and Zip Code)

daidsaot@yahoo.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

David Saunders

401

439-5233

at

(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:

- \$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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2019

DAVID SAUNDERS
PATRIOT RIDERS OF AMERICA INC CHAPTER ON
PO BOX 380993
PORT CHARLOTTE, FL 38938

SUBJECT: PATRIOT RIDERS OF AMERICA, INC. CHAPTER ONE, PORT
CHARLOTTE, FLORIDA
Ref. Number: N11000008460

We have received your document for PATRIOT RIDERS OF AMERICA, INC.
CHAPTER ONE, PORT CHARLOTTE, FLORIDA 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 date of adoption of each amendment must be included in the document.

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

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 219A00019850

RECEIVED

2019 SEP 25 10:00 AM

Articles of Amendment
to
Articles of Incorporation
of

Patriot Riders of America Inc. Chapter One Port Charlotte, Florida

(Name of Corporation as currently filed with the Florida Dept. of State)

N1100008460

(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:

N/A

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**)*

N/A

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

Florida

(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.

Signature of New Registered Agent, if changing

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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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>T</u>	<u>Tom Delaney</u>	<u>17032 Ohara Dr</u>
<input type="checkbox"/> Add			<u>Port Charlotte</u>
<input checked="" type="checkbox"/> Remove			<u>33958</u>
2) <input type="checkbox"/> Change	<u>T</u>	<u>David Saunders</u>	<u>4739 Bullard Street</u>
<input checked="" type="checkbox"/> Add			<u>North Port, FL</u>
<input type="checkbox"/> Remove			<u>34287</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 7-15-19, if other than the date this document was signed.

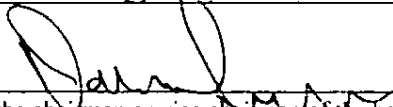
Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 7-15-19

Signature 

(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)

David Saunders
(Typed or printed name of person signing)

Treasurer
(Title of person signing)