# N15000000972

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TALLAHASSEE, FLORIDA

AUG 0 9 2018 S. YOUNG

#### **COVER LETTER**

. TO: Amendment Section Division of Corporations

NAME OF CORPORATION	SWISS AMERICAN ( DN:	CLUB OF MIAMI	INC.	
DOCUMENT NUMBER:	N15000000972			
DOCUMENT NUMBER:		<del></del> -		
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Bea Schmied				
	(	Name of Contact Pe	erson)	
Swiss Club Miami				
		(Firm/ Company	<sub>4</sub> )	
1231 Campo Sano Ave.				
		(Address)		
Coral Gables, FL 33146				
-	(1	City/ State and Zip	Code)	
swissclubmiami@gmail.com	ı			
E	-mail address: (to be used f	or future annual rep	port notification	)
For further information conc	erning this matter, please c	all:		
Bea Schmied		at	786	351 4758
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida [	Department of S	State:
□ \$35 Filing Fee	S43.75 Filing Fee & C Certificate of Status Check & 496 Euclosed	1\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifī s Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)

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

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

	ently filed with the Florida Dept. of State)
SWISS AMERICAN CLUB OF MIAMI INC.	VEDUCCO! 13
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
SWISS CLUB MIAMI INC.	The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1231 Campo Sano Ave.
(Principal office address MUST BE A STREET ADDRESS	S) Coral Gables, FL 33146
	- 5 &
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered off	Tice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	
Nav. Projets at 1 Office Addition	(Florida street address)
New Registered Office Address:	
	, Florida
	•
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for	
a., weep me appointment as regalered agent. Tuni ji	winder with the the configurous of the position.
	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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional she	ing additional Artests, if necessary).	(Be specific)				
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	e date of each amendment(s) adoption:	, if other than the
:H	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ument's effective date on the Department of State's records.	be listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
	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.	
	August 3, 2018  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)	_
	Bea Schmied	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	