# N1700000 1096

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Amend

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### **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Palmetto History Bowl, INC.
DOCUMENT NUMBER: N1700000 1096
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tara Hudson (Name of Contact Person)
Palmetto History Bowl, INC.
7431 SW 120th Street
Pineurest FL 33156 (City/State and Zip Code)
Mudsonta mily Miamio a mail. Com  E-mail address: (to be used for future annual report nonlication)
For further information concerning this matter, please call:
Tara Hudson = 312 399 8709 (cell)
(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:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)  S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional Copy is Enclosed)
Mailing Address Street Address

TO: Amendment Section

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

Street Address
Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment

to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept of State)  N   700 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	of
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:  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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  Tava Hudson  (City)  Florida 33156  (City)  New Registered Agent's Signature, if changing Registered Agent:	Palmetta History Royal INC
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:  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)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Pincust, FL 33156  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:  Taya Hudson  (Florida street address)  Pivecest, Florida 33156  (City)  Rew Registered Agent's Signature, if changing Registered Agent:	(Name of Corporation as currently filed with the Florida Dept of State)
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"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)  PINCLEST, FL 33/56  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  PINCLEST, FL 33/56  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:  New Registered Office Address:  PINCLEST, FL 33/56  Taya Hudson  (Florida street address)  New Registered Office Address:  PINCLEST, FL 33/56  Taya Hudson  (Florida street address)  New Registered Office Address:  PINCLEST, FL 33/56  (City)  (Special 33/56  (City)  New Registered Agent's Signature, if changing Registered Agent:	
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(Mailing address MAY BE A POST OFFICE BOX)  Pineckst, FL 33156  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:  New Registered Office Address:  New Registered Office Address:  Pivecest (Florida street address)  (City) Florida 33156 (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	Pinecrest, FC 33156
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Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:    Taya Hudson	Theasi, 16 55100
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:    Taya Hudson	
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:    Taya Hudson	D. If amending the registered agent and/or registered office address in Florida, enter the name of the
New Registered Office Address:    New Registered Office Address   Florida   Florida   33 56	
New Registered Office Address:  Pivecrest , Florida 33156  (City) , Florida Cip Code)  New Registered Agent's Signature, if changing Registered Agent:	Name of New Registered Agent: Tava Hudson
New Registered Office Address:  Pivecrest Florida 33156  (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	·
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	Pineriest 32156
New Registered Agent's Signature, if changing Registered Agent:	
New Registered Agent's Signature, it changing Registered Agent.	Now Designated Agent's Signature if changing Designated Agents
t nereny accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
an July	an July
Signature of New Registered Agent, if changing	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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Linda Dwyer	7781 Palmetto Court Pinecrest, FL 33156
Remove  2) Change Add	<u>P</u>	Tara Hudson	13370 SW 82hd Ave. Pinecrest, FL 33156
Remove Change Add	VP	Katie Abbott	6030 SW 116+1 St PARECIEST, FL 33156
Remove 4) Change Add	S	Anne M. Cruz-Alvare	2 12255 SW 73rd Ave. Miami, FL 33156
Remove  5) Change Add	<u>S_</u>	Elyssa Lewis	6500 SW 135 Terraco PINECECST, FC 33156
Remove 6) Change Add			
E. If amending or ac (attach additional s		.rticles, enter change(s) here: ). (Be specific)	

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The date of each amendment(s) adopti date this document was signed.	on:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

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 8 14 2020
Signature Tuathoff
(By the chairman of 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)
Tara Hudson
(Typed or printed name of person signing)
President
(Title of person signing)