

N16000000570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

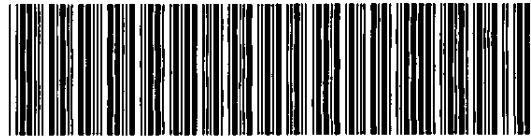
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400283822794

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR - 1 AM 9:13

04/01/16--01003--001 **35.00

RECEIVED
DEPARTMENT OF STATE
16 APR - 1 AM 11:22

APR 4 2016

C LEWIS

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Camp B.T., Inc.

Signature _____

Requested by: Seth

04/01/16

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____

____ LTD Partnership File _____

____ Foreign Corp. File _____

____ L.C. File _____

____ Fictitious Name File _____

____ Trade/Service Mark _____

____ Merger File _____

____ Art. of Amend. File _____

____ RA Resignation _____

____ Dissolution / Withdrawal _____

____ Annual Report / Reinstatement _____

____ Cert. Copy _____

____ Photo Copy _____

____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

____ Driving Record _____

____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

____ Courier _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CAMP B.T., Inc.

DOCUMENT NUMBER: N16 0000 0570

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

Please return all correspondence concerning this matter to the following:

CHARLES CORCES

(Name of Contact Person)

CHARLES CORCES P.A., CPA

(Firm/ Company)

800 W. Dr. Martin Luther King, JR Bldg #3

(Address)

TAMPA, FL. 33603

(City/ State and Zip Code)

CCORCES@TAMPABAY.IT.COM

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

For further information concerning this matter, please call:

CHARLES CORCES

(Name of Contact Person)

at 813 310-1208

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

16 APR -1 AM 9:13

CAMP B.T., Inc

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

216 00000 570

(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:

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:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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

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>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PTD</u>	<u>JOSE MATUTE JR</u>	<u>906 BLUEWOOD ST.</u> <u>BRANDON FL</u> <u>33511</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VSD</u>	<u>ESTHER MATUTE</u>	<u>906 BLUEWOOD ST.</u> <u>BRANDON FL</u> <u>33511</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	_____	_____	_____

1. Introduction
 2. Background
 3. Methodology
 4. Results
 5. Conclusion
 6. References
 7. Appendix
 8. Index
 9. Glossary
 10. Summary
 11. Abstract
 12. Keywords
 13. Subject
 14. Topic
 15. Field
 16. Area
 17. Discipline
 18. Branch
 19. Department
 20. Division
 21. Section
 22. Unit
 23. Group
 24. Team
 25. Committee
 26. Board
 27. Association
 28. Organization
 29. Institution
 30. Agency
 31. Authority
 32. Power
 33. Control
 34. Management
 35. Administration
 36. Operation
 37. Execution
 38. Implementation
 39. Application
 40. Usage
 41. Employment
 42. Utilization
 43. Application
 44. Usage
 45. Employment
 46. Utilization
 47. Application
 48. Usage
 49. Employment
 50. Utilization
 51. Application
 52. Usage
 53. Employment
 54. Utilization
 55. Application
 56. Usage
 57. Employment
 58. Utilization
 59. Application
 60. Usage
 61. Employment
 62. Utilization
 63. Application
 64. Usage
 65. Employment
 66. Utilization
 67. Application
 68. Usage
 69. Employment
 70. Utilization
 71. Application
 72. Usage
 73. Employment
 74. Utilization
 75. Application
 76. Usage
 77. Employment
 78. Utilization
 79. Application
 80. Usage
 81. Employment
 82. Utilization
 83. Application
 84. Usage
 85. Employment
 86. Utilization
 87. Application
 88. Usage
 89. Employment
 90. Utilization
 91. Application
 92. Usage
 93. Employment
 94. Utilization
 95. Application
 96. Usage
 97. Employment
 98. Utilization
 99. Application
 100. Usage
 101. Employment
 102. Utilization
 103. Application
 104. Usage
 105. Employment
 106. Utilization
 107. Application
 108. Usage
 109. Employment
 110. Utilization
 111. Application
 112. Usage
 113. Employment
 114. Utilization
 115. Application
 116. Usage
 117. Employment
 118. Utilization
 119. Application
 120. Usage
 121. Employment
 122. Utilization
 123. Application
 124. Usage
 125. Employment
 126. Utilization
 127. Application
 128. Usage
 129. Employment
 130. Utilization
 131. Application
 132. Usage
 133. Employment
 134. Utilization
 135. Application
 136. Usage
 137. Employment
 138. Utilization
 139. Application
 140. Usage
 141. Employment
 142. Utilization
 143. Application
 144. Usage
 145. Employment
 146. Utilization
 147. Application
 148. Usage
 149. Employment
 150. Utilization
 151. Application
 152. Usage
 153. Employment
 154. Utilization
 155. Application
 156. Usage
 157. Employment
 158. Utilization
 159. Application
 160. Usage
 161. Employment
 162. Utilization
 163. Application
 164. Usage
 165. Employment
 166. Utilization
 167. Application
 168. Usage
 169. Employment
 170. Utilization
 171. Application
 172. Usage
 173. Employment
 174. Utilization
 175. Application
 176. Usage
 177. Employment
 178. Utilization
 179. Application
 180. Usage
 181. Employment
 182. Utilization
 183. Application
 184. Usage
 185. Employment
 186. Utilization
 187. Application
 188. Usage
 189. Employment
 190. Utilization
 191. Application
 192. Usage
 193. Employment
 194. Utilization
 195. Application
 196. Usage
 197. Employment
 198. Utilization
 199. Application
 200. Usage
 201. Employment
 202. Utilization
 203. Application
 204. Usage
 205. Employment
 206. Utilization
 207. Application
 208. Usage
 209. Employment
 210. Utilization
 211. Application
 212. Usage
 213. Employment
 214. Utilization
 215. Application
 216. Usage
 217. Employment
 218. Utilization
 219. Application
 220. Usage
 221. Employment
 222. Utilization
 223. Application
 224. Usage
 225. Employment
 226. Utilization
 227. Application
 228. Usage
 229. Employment
 230. Utilization
 231. Application
 232. Usage
 233. Employment
 234. Utilization
 235. Application
 236. Usage
 237. Employment
 238. Utilization
 239. Application
 240. Usage
 241. Employment
 242. Utilization
 243. Application
 244. Usage
 245. Employment
 246. Utilization
 247. Application
 248. Usage
 249. Employment
 250. Utilization
 251. Application
 252. Usage
 253. Employment
 254. Utilization
 255. Application
 256.

The date of each amendment(s) adoption: _____
date this document was signed.

3/8/2016

if other than the

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

3/8/2016

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)

JOSE MATUTE JR

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILED STATE
SECRETARY OF CORPORATION
DIVISION
16 APR -1 AM 9:13