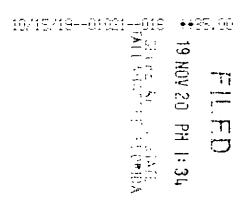
701245

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T SCHROEDER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE GREATER DAVIF/COOPER CITY CHAMBER OF COMMERCE, INC.	
701245 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
CHARINUS C JOHNSON DAVIS	
(Name of Contact Person)	
THE GREATER DAVIE/COOPER CITY CHAMBER OF COMMERCE, INC.	
(Firm/ Company)	
4801 S. UNIVERSITY DRIVE, SUITE 2030,	
(Address)	
DAVIE, FL 33328	
(City/ State and Zip Code)	_
CHARINUS@DAVIE-COOPERCITY.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
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:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is Enclosed) 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

THE GREATER DAVIE/COOPER CITY CHAMBER OF COMMERCE, INC.

(Name of Corporation	as currently filed with the Florida Dept. of State)			
701245				
(Docum	nent Number of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Not For Profit Corporation	n adopts th	e folk	owing
A. If amending name, enter the new name of the	corporation:			
				new
name must be distinguishable and contain the word <u>"Comp</u> any" or "Co." may not be used in the nam	I "corporation" or "incorporated" or the abbreviation.	on "Corp,"	or "I	lnc."
B. Enter new principal office address, if applica	ble:			·
(Principal office address <u>MUST BE A STREET A</u>				
			_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)			
		≅sa		
	-			
			2	—— I
 If amending the registered agent and/or registered agent and/or the new register 	stered office address in Florida, enter the name of	the	0	-
	CHARINUS C JOHNSON DAVIS	·	<u>-</u>	
Name of New Registered Agent:	4801 SOUTH UNIVERSITY DRIVE, SUITE 2030			
	(Florida street address)			
<u>New Registered Office Address:</u>		22270		
	DAVIE , Flor			
	(City) (Z.	ip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager	Registered Agent: 11. I am familiar with and accept the obligations of the	ie position.		
-	Signature of New Registered Agent. If Chans	ting		

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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	NICOLE HANNA	4801 S UNIVERSITY DR
Add			SUITE 2030
X Remove			DAVIE, FL 33328
2) Change	CEO	CHARINUS C JOHNSON DAVIS	4801 S UNIVERSITY DR
X Add			SUITE 2030
Remove			DAVIE, FL 33328
3) Change	OFFICE	HOFIT LOTTENBERG	4801 SOUTH UNIVERSITY DR
Add			SUITE 2030
X Remove			DAVIE, FL 33328
4) Change Add Remove			20 PH 1 34
5) Change Add		<u></u>	
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)		
			
11.11.1		•	
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	<u> </u>		
			<u> </u>
			NOV 20
			0 V 20
			PH : 3t

	date of each amendment(s) adoption:	if other than the
iate	this document was signed.	
Effe	(no more than 90 days after amendment file date)	
Not loci	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date with ument's effective date on the Department of State's records.	il not be listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
K	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 10/10/19	
	(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) CHARINUS C JOHNSON DAVIS (Typed or printed name of person signing) CEO (Title of person/signing)	•
		<u>-</u> 1