## 707474

|                      | (Requestor's Name)       |
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| <u> </u>             | (City/State/Zip/Phone #) |
| PICK-UF              | P WAIT MAIL              |
|                      | (Business Entity Name)   |
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| Certified Copies     | Certificates of Status   |
| Special Instructions | to Filing Officer:       |
|                      | J. HORNE<br>OCT 2 0 2022 |





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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

| NAME OF CORPORATION:   | UNTRY CLUB, INC         |  | <del></del>  |
|--|-------------------------|--|--|
| 707474 DOCUMENT NUMBER:  |                         |  |  |
| The enclosed Articles of Amendment and fee are sul                       | bmitted for filing.     |  |  |
| Please return all correspondence concerning this mat                     | tter to the following:  |  |  |
| MONICA FOLSOM  |                         |  |  |
|  | (Name of Contact P      | erson)   | · · · · · · · · · · · · · · · · · · ·                                    |
| PLANTATION BOOKKEEPING & PAYROLL SV                                      | CS LLC                  |  |  |
|  | (Firm/ Compan           | y)   |  |
| PO BOX 1264  |                         |  |  |
| <del></del>  | (Address)               |  | •  |
| PERRY, FL 32348  |                         |  |  |
|  | (City/ State and Zip    | Code)  |  |
| MONICA@PLANTATIONBOOKKEEPING.COM   |                         |  |  |
| E-mail address: (to be use   | ed for future annual re | port notification  | n)   |
| For further information concerning this matter, pleas                    | se call:                |  |  |
| MONICA FOLSOM  | at                      | 850  | 843-0259   |
| (Name of Contact Perso   | n)                      | (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            |                         | Certif<br>is Certif  | 0 Filing Fee<br>ficate of Status<br>fied Copy<br>tional Copy is<br>osed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Ar<br>Di                | reet Address<br>mendment Sect<br>vision of Corpo<br>ne Centre of T | orations   |

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

JEFFERSON COUNTRY CLUB, INC

## BOULET OF SA (Name of Corporation as currently filed with the Florida Dept. of State) 707474 (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: 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: (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

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                   | PT         John Do           V         Mike Jo           SV         Sally Sr | ne <u>s</u>                                  |  |
|--|--|--|--|
| Type of Action<br>(Check One)                      | <u>Title</u>   | <u>Name</u>                                  | <u>Addres</u> s                                  |
| 1) xxxx Change Add                                 | Director   | CLEVELAND COLLINS                            | 780 HORNE CEMETERY ROAD<br>THOMASVILLE, GA 31792 |
| Remove   |  |  |  |
| 2) xxxx Change Add                                 | Presiden   | JAMES W PURVIS, IV                           | 131 REICHDORFF ACRES RD<br>MONTICELLO, FL 32344  |
| Remove  3 )  | Director   | TOM E ISPHORDING                             | 480 W WASHINGTON ST<br>MONTICELLO, FL 32344      |
| 4) xxxx Change Add                                 | <u>VP</u>  | KEVIN BARNWELL                               | 131 REICHDORFF ACRES MONTICELLO, FL 32344        |
| Remove   |  |  |  |
| 5) Change Add                                      |  |  |  |
| Remove   |  |  |  |
| 6) Change Add                                      | ·  |  |  |
| Remove   |  |  |  |
| E. If amending or addin<br>(attach additional shee | g additional Arti<br>ts, if necessary).                                      | cles, enter change(s) here:<br>(Be specific) |  |
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|   |                    |                  |                 |              |                |                      |
| The date of each amendment(s) adoption                                | 07/15/22           |                  |                 |              |                | والمعاد مصاد مصادري  |
| The date of each amendment(s) adoption date this document was signed. | )n;                |                  |                 |              |                | , if other than the  |
| 07/15/22  |                    |                  |                 |              |                |                      |
| Effective date if applicable:   | (no more than      | 00 J 6           |                 | - d-+t       |                |                      |
|   | (no more than      | 90 aays ajter a  | menament file   | e aate)      |                |                      |
| Note: If the date inserted in this block do                           | es not meet the    | applicable statt | atory filing re | quirements.  | this date will | not be listed as the |
| document's effective date on the Departm                              | nent of State's re | cords.           |                 |              |                |                      |

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.

| re are no members or members entitled to vote on the amendment(s). The amendment(s) was/were pted by the board of directors.  |
|---|
| Dated 07/15/22  |
| 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)  L R JORDAN A Communication of the court appointed fiduciary by that fiduciary)  |
| (Typed or printed name of person signing)   |
| REGISTERED AGENT  |

(Title of person signing)