109165

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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EFFECTIVE DATE

Mamachs

SEP 28 2020

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: GFWC Whispering Pines Woman's Club, Inc. DOCUMENT NUMBER: 709165 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: <u>Virginia Onorati</u> (Firm/ Company) Palmetto Bay FL 33157
(City/State and Zip Code) 9000733158@ aol. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Virginia Onorati at (305) 299-6560 (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 & □\$43.75 Filing Fee & □\$52,50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation



GFWC Whispering Pines (Name of Corporation as currently filed with the Florida D	Woman's Club Inc.	
_	Dept. of State)	
709165	er of Corporation (if known)	
·		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the	e following
A. If amending name, enter the new name of the corporati	ion:	
Whispering Pines Woman	is Club Inc.	The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp.'	or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		- [2]
C. Enter new mailing address, if applicable:	11 / A.	ن.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N / /T	
		<u> </u>
	adding in Planta and the name of the	-: -:
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		28
Name of New Registered Agent:	N/A	
Name of New Registered Agent.	2/11	
	(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 far	miliar 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 D V Mike John SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add			
Remove		6	
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add		R /	
Remove	<i>(</i>	X	
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Artes, if necessary).	ticles, enter change(s) here: (Be specific)	
	_		<u></u>

	
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/ /	
The date of each amendment(s) adoption: $7/31/2020$, if other than the
date this document was signed.	,
0 / /	
Effective date if applicable: $\frac{7/1/2020}{}$	
The date of each amendment(s) adoption: 7/31/2020 date this document was signed. Effective date if applicable: 9/1/2020 (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 wi	ii 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.

pted by the b	oard of directors.
Dated	7/31/2020
	' /
Signatur	· Virginia Onorati
	(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)
	Virginia Onorati
	(Dyped or printed name of person signing)
	l reasurer