## 711385

(0-	questor's Name)	
(Re	questors (vame)	
_		
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(55		,
	cument Number)	
(1)	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
1		

Office Use Only



700355698657

11/38/20--01017--009 ++35.00

Amind (1)?

1382 & 1 KAU

I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Vestern Martin County Cl	namber of Com	nerce, Inc.
711385 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning the	nis matter to the following	<b>:</b>	
Melissa G. Corbett			
	(Name of Contact	t Person)	
The MilCor Group, Inc.			
	(Firm/ Comp	any)	
10975 SE Federal Hwy.			
	(Address	)	
Hobe Sound, Florida 33455			
	(City/ State and Z	ip Code)	
melissac@themilcorgroup.com			
E-mail address: (to	be used for future annual	report notificat	on)
For further information concerning this matter	r, please call:		
Melissa Corbett		772 at	223-8850
(Name of Contact	t Person)		(Daytime Telephone Number)
Enclosed is a check for the following amount	made payable to the Flori	da Department c	of State:
■ \$35 Filing Fee □\$43,75 Filing Certificate of	<del>-</del>	Cert by is Cert (Ad	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Se Division of Cor The Centre of	ction porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Indiantown Western Martin County Chamber of Commerce, Inc.

(Name of Corporation as currently filed with the	e Florida D	ept. of State)	
711385			
(Docum	nent Numbe	er of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporati	ion:	
Indiantown Chamber of Commerce, Inc.			The nev
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ton" or "incorporat	
B. Enter new principal office address, if applica	ıble:	16656 SW Warfield	d Boulevard
(Principal office address <u>MUST BE A STREET A</u>		Indiantown, FL 349	956
		<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )	PO Box 602	
	-	Indiantown, FL 349	956
		<del>,</del>	
D. If amending the registered agent and/or regi			la, enter the name of the
new registered agent and/or the new register		·	
Name of New Registered Agent:	Melissa C	orbett	
	16656 SW	' Warfield Boulevard	d
New Registered Office Address:		1	(Florida street address)
New Registered Office Address.	Indiantow		21054
	mulantow		, Florida 34956
		(City)	(Zip Code)
New Registered Agent's Signature, if changing 1 I hereby accept the appointment as registered agen			pt the obligations of the position.
<del>-</del>	37	gnature of New Regi	istered 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 Doc 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 Doc, 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	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	ED	Kelly Catania	16656 SW Warfield Blvd. Indiantown, FL 34956
x Remove			SAME ADDRESS FOR ALL
2) Change Add	<u>S</u>	MaryBeth Parker	
X   Remove	ED	Kerrie Tvndall	
4) Change Add	<u>S</u>	Kristine Murphy	
Remove			
5) Change Add	<u>T</u>	David Hafner	
Remove			
6) Change Add	<u>T</u>	Deborah L Hardee	
<u>⊀</u> Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			·

	<del></del>

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	
Signatu	
	(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)
	Melissa G. Corbett
	(Typed or printed name of person signing)

(Title of person signing)