711769

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SCORETALY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	oman's Club Inc			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Birgit Elfinger				
	(Name of Contact	Person)		<u></u>
Davis & Associates				
	(Firm/ Compa	ny)		
400 5th Ave S, Suite 301				
	(Address)			
Naples, FL 34102				
	(City/ State and Zi	p Code)		<u> </u>
belfinger@johndaviscpa.com				
E-mail address: (to be us	sed for future annual r	eport notification	on)	
For further information concerning this matter, plea	se call:			
Birgit Elfinger		239	775-8588 (Daytime Telephore) (State:	SE(
(Name of Contact Person	on)	(Area Code)	(Daytime Telepho	ne Number
Enclosed is a check for the following amount made	payable to the Florid	a Department of	State:	AH)
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	: □\$43.75 Filing Fe	e & □\$52.5 Certi r is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)	CONTENTE STATE
Mailing Address Amendment Section		Street Address	tion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 2023 HAY 12 AH 11: US

Articles of Amendment Articles of Incorporation

GFWC Naples Woman's Club Inc

(Name of Corporation as currently filed with the FI	orida Dept. of State)	
711769		
(Document	t Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Proj	fit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or t	he abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	:	
(Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)	
		-
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or register	rad office address in Florida, entar	r the name of the
new registered agent and/or the new registered		the name of the
Name of New Registered Agent:		
		· · ·
	(Florida s	treet address)
<u>New Registered Office Address:</u>		
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	I am familiar with and accept the o	bligations of the position
	Signature of New Registered A	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 a change, Mike Jones led Mike Jones, V as Remove	wes the corporation	nanner. Currently John Doe is listed as the lon, Sally Smith is named the V and S. These s SV as an Add.	PST and Mike Jones is listed as they PST and Mike Jones is listed as they PST as a specific point of the PST as a specific point of the PST and Mike Jones is listed as they PST and Mike Jones is listed as John Doe.	Change,
Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	74. V.	MAY 12 AM11: 07
Type of Action (Check One)	Title	<u>Name</u>	Address FL STATE	1: 07
1) Change Add	2nd VP	Kruse, JoAnne	2473 Breakwater Way Apt 7102 Naples, FL 34112	_
 x Remove 2) Change x Add 	Secretar	Diane McMeekin	320 Springline Drive Naples, FL 34102	- - -
Remove 3) Remove Add Remove				
4) Change Add				_ -
Remove 5) Change Add Remove				-
6) Change Add				- - -
E. If amending or addi (attach additional she		ticles, enter change(s) here: (Be specific)		-
				- -
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The date of each amendment(s) adoption:	SEE FL	than the
date this document was signed.		
Effective date if applicable:		
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 document's effective date on the Department of State's records.	be listed a	is the
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.		

, ,

Dated	May 4, 2023
	TO R
Signatur	e last times
<u>.</u>	(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)
	Patricia Taylor

(Title of person signing)

President

SECRETALL OF STATE

2023 MAY 12 AM 11: 07