

716023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

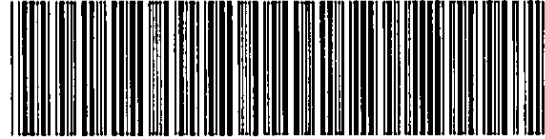
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 DEC -2 AM 10:24

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A. RAMSEY
DEC -2 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2022

CLINTON PASKERT
RUSKIN MEMORIAL PARK ASSOCIATION INC
201 14TH AVENUE SE
RUSKIN, FL 33570

SUBJECT: RUSKIN MEMORIAL PARK ASSOCIATION, INC.
Ref. Number: 716023

We have received your document for RUSKIN MEMORIAL PARK ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 222A00020590

22 SEP 28 AM 11:22

FILED

Articles of Amendment
to
Articles of Incorporation
of

2022 DEC -2 AM 10: 24

RUSKIN MEMORIAL PARK ASSOCIATION, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

716023

(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:

_____ The new
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

New Registered Office Address:

_____ Florida street address

_____ (City)

_____ Florida

_____ (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of this 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 CEO, CFO = Chief Executive Officer, CTO = 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. Due to 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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input type="checkbox"/> Remove	V	Mike Jones
<input type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	THOMAS PYCHE	
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	CLINTON PASKERT	1724 1ST STREET SW RUSKIN, FL 33570
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

F. If amending or adding additional Articles, enter change(s) here.

(attach additional sheets, if necessary) (Be specific)

The date of each amendment(s) adoption: _____
date this document was signed.

Effective date if applicable: 8/31/2022
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 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.

- ☐ 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 10/28/2022

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.)

CLINTON PASKERT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)