

717975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

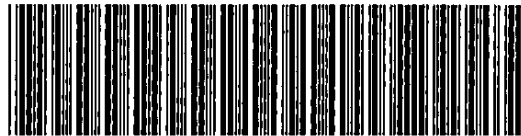
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800080062668

09/26/06--01008--022 \*\*43.75

FILED  
06 OCT -9 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Plane Change*

*10/09/06*

*Dc*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** DUNDEE CHAMBER OF COMMERCE

**DOCUMENT NUMBER:** 717975

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHELE M. SHIPE

(Name of Contact Person)

DUNDEE CHAMBER OF COMMERCE

(Firm/ Company)

310 MAIN STREET      P.O. BOX 241

(Address)

DUNDEE, FL 33838

(City/ State and Zip Code)

For further information concerning this matter, please call:

LISA BERENDT

(Name of Contact Person)

at ( 863 ) 439-3261

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 28, 2006

MICHELE M. SHIPE  
DUNDEE CHAMBER OF COMMERCE  
310 MAIN STREET, P. O. BOX 241  
DUNDEE, FL 33838

SUBJECT: DUNDEE CHAMBER OF COMMERCE, INC.  
Ref. Number: 717975

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6906.

Darlene Connell  
Document Specialist

Letter Number: 306A00057769

RECEIVED  
06 OCT -9 AM 8:00  
DIVISION OF CORPORATIONS

DUNDEE CHAMBER OF COMMERCE, INC.

717975

DUNDEE AREA CHAMBER OF COMMERCE INC.

FILED  
06 OCT -9 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Attach additional pages if necessary)  
(continued)

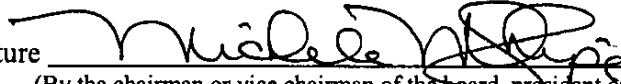
The date of adoption of the amendment(s) was: 08/07/2006

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

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.)

**MICHELE M. SHIPE**

(Typed or printed name of person signing)

**PRESIDENT**

(Title of person signing)

**FILING FEE: \$35**