## 729921

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**COVER LETTER** 

TO: Amendment Section Division of Corporations Castle Gardens Executive Council, Inc. NAME OF CORPORATION: \_\_\_\_ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Castle Gardins Executive Council, Inc 4850 NW 22ND CT (Address) LAUDERHILL, FL 33313 (City/ State and Zip Code) CASTLEEXECUTIVE@COMCAST.NET E-mail address. (to be used for future annual report notification) For further information concerning this matter, please call: BELLE LOPEZ 8013640 (Area Code) (Daytime Telephone Number) (Name of Contact Person) 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 Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

## Mailing Address

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

(Additional Copy is Enclosed)

2022 APR 15 AM 11: 23

CACALL MASSES, FL

## Articles of Amendment to Articles of Incorporation of

CASTLE GARDENS EXECUTIVE COUNCIL INC			
(Name of Corporation as currently filed with the Florid	a Dept. of State)		
729921			
(Document Nur	mber of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	cutes, this <i>Florida</i>	Not For Profit Corporation adopts the	he following
A. If amending name, enter the new name of the corpor	ration:		
			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incor	porated" or the abbreviation "Corp.	"or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u>SS</u> )		
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
1			
			_
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in F e address:	lorida, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
-		m . : i	
	(City)	, Florida ( <i>Zip Code)</i>	
None Descriptional Language Company of the Description		• •	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am J		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	<u>X Change</u> <u>PT John Doe</u> <u>X Remove</u> <u>V Mike Jones</u>		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	SECRE1	JAMELA PETERS	4850 NW 22ND CT LAUDERHILL FL 33313
2) <u>× Change</u> Add	ASST.SI	PATRICIA BILES	4850 NW 22ND CT LAUDERHILL,FL 33313
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove  Change Add			
Remove			<del> </del>

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The date of each amendment(s) adoption:	04/01/2022	, if other than the
date this document was signed.		
Effective date if applicable:		

(no more than 90 days after amendment file date)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
$D_{ated} = 4 - (0 - 2022)$
Signature Bagio Aullips
(By the chairman or vice obtairman 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)
(Typed or printed name of person signing)
President
(Title of person signing)

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