# Flor la Department of State Division of Corporations Liectronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000139193 3)))



H160001391933ABC0

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210 Phone : (561)713-2095

Fax Number : (561) 747-4113

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
	ALLII TARRI	

MECEIVED

# COR AMND/RESTATE/CORRECT OR O/D RESIGN NORTHERN PALM BEACH COUNTY CHAMBER OF COMMERCE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	0.5
Estimated Charge	\$35.00



# **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION	Northern Palm Beach	County Chamber of	Commerce, I	nc.	
DOCUMENT NUMBER:	733037				
The enclosed Articles of An	nendment and fee are subp	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
Beth Kigel					
		(Name of Contact Pe	erson)		
Norther Palm Beach County	y Chamber of Commerce,	Inc.			
		(Firm/ Company	·)	<del></del>	
5520 PGA Boulevard, Suite	: 200				
		(Address)			<del></del>
Palm Beach Gardens, FL 33	3418				
		(City/ State and Zip	Code)		
beth@npbchamber.com					
	-mail address: (to be used	for future annual rep	ort notification	1)	
For further information cond	cerning this matter, please	call:			
Beth Kigel		at	561	748-3948	
· ·	(Name of Contact Person)	<del>)</del>	(Area Code)	(Daytime Telephone Number	T)
Enclosed is a check for the	following amount made pa	yable to the Florida I	Department of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is used)	

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

## Articles of Amendment to Articles of Incorporation of

Northern Palm Beach County Chamber of Commerce	e, Inc.	
(Name of Corporation a	s currently filed with the Florida I	Dept. of State)
733037		
(Docume	nt Number of Corporation (if known	)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Pro	fit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:	
Palm Beach North Chamber of Commerce, Inc.		The new
name must be distinguishable and contain the word	corporation" or "incorporated" or	the abbreviation "Corp." or "Mc."
"Company" or "Co." may not be used in the name.	N7(4	
B. Enter new principal office address, if applicable		···· ;
(Principal office address <u>MUST BE A STREET AD</u>	<u>DRESS</u> )	
		<u> </u>
C. Enter new mailing address, if applicable:	N/A	".
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
	4 60 - 11 - 1 70 - 11 - 1	
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registerer		r the name of the
	V/A	
White of New Resistered Agent.		,
-	(Florida:	Street address)
New Registered Office Address:	(1-27-4-11	
		. Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		bligations of the position.
	Signature of New Registered	Agent, if changing

Jun. 7. 2016 2:02PM

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>V</u> <u>N</u>	ohn Doe Aike Jones sally Smith		·	
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1)Change		N/A			
Add					
Remove					
2) Change				·	
Add					
Remove					
3)Change					
Add				<u> </u>	
Remove	,				
4) Change		<del></del>			
Add	•				
Remove					
5) Change					
Add					
Remove			,		
6)Change			,		
Add					
					<del></del>
Remove					

attach additional sheets, if necessary). (Be specific)						
√/A		·				
			<del>~~~</del>	<u>,                                     </u>		
		<del></del>		<u></u>	•	
		<del>, ,,,</del>				
			<del></del>			
				· <u></u>		
<del></del>				<u>_</u>		
			<del></del>		<del></del>	
					<del></del>	
	<del></del>	<del></del>	·		<del></del>	
	<del></del>			······································		
			<del></del>		<u> </u>	
					·	
		_				
					,	
		· <del></del>				
			<del>_</del>			
					·	

Ju	n. 7.	2016 2	:02PM	ALL FL	ORIDA LAND TITLE March 15, 2016	COMPANY	No.2410	P. 7
		f each ame		adoption				, if other than the
date	this do	cument was		ine 15, 201	16			
Effe	ctive d	ate <u>if appli</u>						
				(	no more than 90 days aft	er amendment file date)		
	_				s not meet the applicable s at of State's records.	statutory filing requirement	s, this date will not	be listed as the
Ado	ption c	of Amendo	ent(s)		(CHECK ONE)		•	
		nendment(s ere sufficie		~	by the members and the n	number of votes cast for the	amendment(8)	
		are no men			itled to vote on the amen	dment(s). The amendment(	(s) was/were	
		Dated	June 7, 2	2016	n 1			
		Signature		The said	lene fl			
		_	have no	been selec		rd, president or other office if in the hands of a receive iary)		
					Philippe	Teck		
					(Typed or printed	name of person signing)		
					Chairm	nan		
				•	(Title	of person signing)	<del></del>	