73855/

(Re	equestor's Name)	
(Ac	ldress)	
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, PICK-UP	☐ WAIT	MAIL
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SEP 11 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FLORIDA	PORTUGUESE	AMERICAN CLUB, INC
DOCUMENT NUMBER: 73855	51	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
/	<i>A</i>	
LICINIO	CRUZ (Name of Contact Person	
	(Name of Contact Person	n)
FLORIDA PORTUGUESE	AMERICA ~ (Firm/ Company)	CLUB, INC
325 SW 26th S	5+	
	(Address)	
Fort LANderdale	F1 ,23	315
TON THE CAUCATION	(City/ State and Zip Cod	c)
LEEJCJR E-mail address: (to be used	@ BELLSO C d for future annual report	DTH. NET
For further information concerning this matter, please	call:	
(Name of Contact Person)	at (954	806-4980
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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		Address
Amendment Section		Iment Section
Division of Corporations P.O. Box 6327		on of Corporations
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TLDRIDA PORTUGUESE AMERICAN CLUB, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 738551 (Document Number of Corporation (if known)
738551
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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)
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C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
(Mailing address MAY BE A POST OFFICE BOX) γ γ γ γ γ γ γ γ γ γ γ γ γ
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:
\sim
(Florida street address) New Registered Office Address:
1/^
(City), Florida (Zip Code)
(mp study
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Thereby accept the appointment as registered agent. I am jamular with and accept the obligations of the position.
Signature of New Registered Agent, if changing

Page 1 of 4

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	PT John I V Mike SV Sally	Jones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Add Remove	PSTD	Natalia GREGORIO	325 SW 26 ths 7 Ft. LAnder dale Fl. 33315
2) Change Add Remove	PD	Jose CARVAlheiro	325 SW 26 HSt. Ft. LAderdale FL. 33315
3) Change Add Remove	<u>5)</u>	ADELINO AGOSTINHO	325 SW 26 Kst. At. LANDERDALE Fl. 33315
4) Change Add Remove	II	MARIA SOUSA	325 SW 26tst. Ft. Lauder chile FL. 33315
5) Change Add Remove	D	Fernando Baptista	325 SW 26thst. Ft. Landerdale FL 33315
6) Change Add Remove	D	MANUEL FREITAS	325 SW 26 Hst. Ft. Landerdale
Kemove		Page 2 of 4	16 332/3

E. <u>If amending</u>	or adding additions ional sheets, if necess	al Articles, enter	change(s) here:		
(attach additi	ional sheets, if necess	ary). (Be specif	ic)		7
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the date of each amendment(s) adoption:	, if other than th	
date this document was signed.		
Effective date if applicable: 9 2014		
(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(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 8/30/2014		
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)		
hicinio CRVZ		
(Typed or printed name of person signing)		
Legistered Agent		
(Title of person signing)		