741057

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7024 IJE 18 FH 3: 42



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CRES CLUB, INC.		
741057 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	are submitted for filin	ıg.	
Please return all correspondence concerning th	is matter to the follow	ving:	
	(Name of Co	ntact Person)	-0
ANNE M. MALLEY, PA			
	(Firm/ Co	ompany)	· · · · · · · · · · · · · · · · · · ·
36739 COUNTY ROAD 52, SUITE 105			
	(Add	ress)	
DADE CITY, FL 33525			
	(City/ State a	nd Zip Code)	
ADMIN@BETMAR.ORG			
E-mail address: (to	be used for future and	nual report notifica	tion)
For further information concerning this matter.	, please call:		
Tom Frain		813 at	782-0403
(Name of Contact	Person)	(Area Code	e) (Daytime Telephone Number)
Enclosed is a check for the following amount :	nade payable to the F	florida Department	of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of \$		opy Ce I copy is Ce (Ac	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is aclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations		Division of Co	

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BETMAR ACRES CLUB, INC.

		7021 11 8 1 P DV 0
(Name of Corporation as currently filed with the Florida D	ept. of State)	2624 HAR 18 PH 3: 42
741057		·-
(Document Number	r of Corporation (if known)	-1 1 4
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Prof</i> i	t Corporation adopts the following
A. If amending name, enter the new name of the corporati-	on:	
N/A		The new
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	ion" or "incorporated" or th	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
		·
	··-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered offic		the name of the
new registered agent and/or the new registered office ac	iaress:	
Name of New Registered Agent: N/A		
	(Florida str	reet address)
New Registered Office Address:		
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fan		ligations of the position.
Sig	gnature of New Registered Ag	gent, ij 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>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add			
Remove 3) Remove 4 Add 8 Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee	ts, if nece	onal Articles, enter change(s) here: essary). (Be specific) oration are amended as follows:	
Afficie 9 of the Articles o	и инсогре	дацон аге апісносц аз тономѕ.	
The bylaws of the Corpor	ration are	to be made, amended or rescinded by two-thirds vote	of the members present and
voting at a general meeting	ng or a sp	ecial meeting called for that purpose, previous notice	of at least two weeks having been
given to the membership.			

••	
<u> </u>	<u>-</u>
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	<u>.</u>
<u>,</u>	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	,
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will t document's effective date on the Department of State's records.	iot be listed as the
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 3/4/2024 Signature Haven Finan
(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)
duct court appointed reductary by that treatments
GEORGE C FERRART
(Typed or printed name of person signing)
TRESIDENT
(Title of person signing)