## 741886

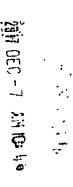
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## **COVER LETTER**

> P.O. Box 6327 Tallahassee, FL 32314

	COVER LETTER	
TO: Amendment Section Division of Corporations	COVER LETTER .	To the state of th
NAME OF CORPORATION: WINTER PARK R	ACQUET CLUB IN	- 5 · ·
DOCUMENT NUMBER:		r. g
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	iter to the following:	
DIANA MCNAIR		
	(Name of Contact Person)	_
WINTER PARK RACQUET CLUB INC		
	(Firm/ Company)	_
P.O. BOX 2830		
	(Address)	_
WINTER PARK . FL 32790-2830		
	(City/ State and Zip Code)	_
diana@wprc.net		
E-mail address: (to be use	ed for future annual report notification)	_
For further information concerning this matter, pleas	e call:	
DIANA MCNAIR	407 644-2226 at	
(Name of Contact Perso		_
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)    S52.50 Filing Fee	
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



WINTER PARK RACQUET CLUB INC.

(Name of Corporation as	currently filed with the Flor	ida Dept. of State)
741886		
(Document	Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u> )	
	<del></del>	
C. Enter new mailing address, if applicable:	e.	
(Mailing address <u>MAY BE A POST OFFICE BON</u>	<u> </u>	
		<del></del>
D. If amending the registered agent and/or registere	ed office address in Florida	enter the name of the
new registered agent and/or the new registered of		enter in name of the
Name of New Registered Agent:		
	· <u>-</u>	
<del>-</del> -	(Fle	orida street address)
New Registered Office Address:		
_		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		
I hereby accept the appointment as registered agent. I	am familiar with and accept	the obligations of the position.
<del></del>	Signature of New Registe	ered 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>PT</u> <u>V</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	<u>T</u>	DAVID CORDDY	346 VITORIA AVENUE
Add			WINTER PARK, FL 32789
X Remove			
2) Change	<u>T</u>	CHARLES D. FOGG JR.	450 JO AL CA AVENUE
X Add			WINTER PARK, FL 32789
Remove			
3 ) Change		<u> </u>	
Add			<del></del>
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
<i>δ</i> ) Change		_	
Add			
Remove			<del></del>

E. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)	<del></del>			
N/A					
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	<u>,                                    </u>				
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		NOVEMBER 8, 2017	
	date of each amendmen this document was signed	t(s) adoption:	, if other than the
Effe	ective date <u>if applicable:</u>	NOVEMBER 8, 2017	
		(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	: listed as the
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/w was/were sufficient for a	vere adopted by the members and the number of votes cast for the amendment(s) pproval.	
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated	11/28/17	
	Signature	11.2	,
	have i	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiductary by that fiduciary)	
	W	ILLIAM LEARY	
	_	(Typed or printed name of person signing)	
	PR	ESIDENT	
		(Title of person signing)	

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