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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: General Womens Club of Lehigh Acres
DOCUMENT NUMBER: 745423

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frances DePalma
Name of Contact Person
General Womens Club of Lehigh Acres
Firm/ Company
506 Bethany Village Circle
Address
Lehigh Acres Florida 33936
City/ State and Zip Code
fran-depalma@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frances DePalma at (239) 331-9806
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- ☒ \$35 Filing Fee
☐ \$43.75 Filing Fee & Certificate of Status
☐ \$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

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
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

The General Womans Club of Lehigh Acres

(Name of Corporation as currently filed with the Florida Dept. of State)

745423

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* 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)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Gayle Reynolds

2110 Truman Ave

Alva, FL 33920

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:

Gayle Reynolds

2110 Truman Ave

(Florida street address)

New Registered Office Address:

Alva

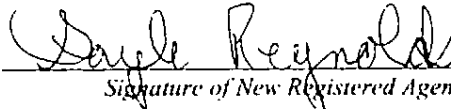
(City)

Florida 33920

(Zip Code)

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.



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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Venita Prescott</u>	<u>210 South Lake Dr</u> <u>Lchigh Acres, FL 33936</u>
2) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Gayle Reynolds</u>	<u>2110 Truman Ave</u> <u>Alva, FL 33920</u>
3) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>1 VP</u>	<u>Betty Smith</u>	<u>4552 Blackberry</u> <u>Ft Myers, FL 33905</u>
4) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>1 VP</u>	<u>Aura Wilson</u>	<u>14170 Roof Street</u> <u>Ft Myers, FL 33905</u>
5) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>n/a</u>	<u>n/a</u>	
6) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>n/a</u>	<u>n/a</u>	<u>n/a</u> <u>n/a</u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Lined area for text entry.

The date of each amendment(s) adoption: 8/20/2024 if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated

Signature

FRANCES DEPALMA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2024

FRANCES DEPALMA
506 BETHANY VILLAGE CIRCLE
LEHIGH ACRES, FL 33936

SUBJECT: THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC.
Ref. Number: 745423

We have received your document for THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC., however, upon receipt of your document no check was enclosed. Please return your ~~document~~ along with a **check** or **money order** made payable to the Department of State for \$35.00.

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

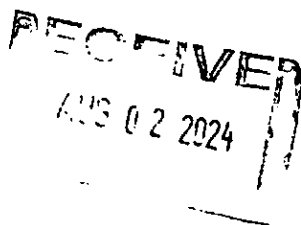
We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 324A00015058





FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2024

FRANCES DEPALMA
506 BETHANY VILLAGE CIRCLE
LEHIGH ACRES, FL 33936

SUBJECT: THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC.
Ref. Number: 745423

We have received your document for THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have received your document for THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPOATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

You failed to make the correction(s) requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 624A00017492



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2024

GAYLE REYNOLDS
2110 TRUMAN AVE
ALVA, FL 33920

SUBJECT: THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC.
Ref. Number: 745423

We have received your document for THE GENERAL WOMANS CLUB OF LEHIGH ACRES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 324A00020299

