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2018 SEP -4 PM 2: 02
SECRETARY OF STATE
TALL SHASSEF FI

C. GOLDEN SEP 11 2018

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Pilot Clu NAME OF CORPORATION:	b of Crystal River Flo	orida Inc		
749067 DOCUMENT NUMBER:				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and	fee are submitted for fi	ling.		
Please return all correspondence concerning	g this matter to the fol	owing:		
Joyce A. Centrella				
	(Name of C	Contact Person)		
Pilot Club of Crystal River Florida Inc.				
	(Firm/	Company)		
9227 W. Marquette Lane				
	(A	ddress)		
Crystal River, FL 34428				
	(City/ State	and Zip Code)		
joyceanncentrella1957@gmail.com				
E-mail address:	(to be used for future :	innual report notificat	ion)	
For further information concerning this ma	tter, please call:			
Joyce A. Centrella		352 at	352.601.0136	
(Name of Con	tact Person)		) (Daytime Telephone Nu	mber)
Enclosed is a check for the following amou	int made payable to the	Florida Department o	of State:	
	ing Fee & \$\sum \\$43.75 F of Status Certified (Additional enclosed)	Copy Cer nal copy is Cer I) (Ac	50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	
Mailing Address		Street Address	5	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2018 SEP -4 PM 2: 02 Pilot Club of Crystal River Florida Inc. (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FL 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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: (City) 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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	V	NANCY WILSON	402 N. Venturi Avenue
Add			Crystal River, FL 34429
Remove			*117
2) Change			_
Add			
Remove			
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	*		_
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·

	e date of each amendment(s) adoption:, it other than t e this document was signed.
	ective date if applicable:
Citt	(no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
Ado	option of Amendment(s) (CHECK ONE)
Þ	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
	Signature deepe 1. Coure
	(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)
	Joyce A. Centrella
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)