761845

• **			
(Requestor's Name)			
(Address)			
. (Address)			
(City/State/Zip/Phone #)			
(City) States 2 pm Hone 11)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
,			
·			

Office Use Only



900182986059

07/22/10--01008--033 **35.00

10 AUG -3 AM 9: L2

Apend. 8/5/10



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 22, 2010

LON VON LINTEL ACTIVE DIVERS ASSOCIATION, INC. 13374 S.W. 46 TERR. MIAMI, FL 33175

SUBJECT: ACTIVE DIVERS ASSOCIATION, INC.

Ref. Number: 761845

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 010A00017788

Correct forms filled out. You already have chick

PRECE PRING 23

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Active Divers Association INC. 761845 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LON VON Lintel Active Divers Association
(Firm/Company) 13374 SW 46 TERRALE (Address) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Low Von Linte | at (305) 251 4975

(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee □\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address**

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

		sociation	
(Name of Corporation as cur	rrently filed with	the Florida Dept. of St	tate)
76 1845			
(Document N	umber of Corporat	ion (if known)	
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of A. If amending name, enter the new name	Incorporation:	•	Profit Corporation adopts
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			corporated" or the
B. Enter new principal office address, if a (Principal office address MUST BE A STRE			<u>. </u>
C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF)			10 AUG -
D. If amending the registered agent and/o new registered agent and/or the new re			nter the name of the
Name of New Registered Agent:			_
New Registered Office Address:	(Flori	ida street address)	_
		(C:t-)	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as register position.			ept the obligations of the
_	Signature of New	Registered Agent, if ch	anging

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)

Title	<u>Name</u>	<u>Address</u>	Type of Action
TD	Obermeier, DA	fue 8201 SC Miami Fl	\(\lambda \) \
TD	Obermeier, DA Kosakowski Go	PRABLE 8221 NW 8	Add PLACE Remove FL 33324-1203
			Add Remove
	ding or adding additional Articles, enditional sheets, if necessary). (Be s	nter change(s) here: pecific)	
- Carach at	tuanional sneets, if necessary). (be s		

	<u>.</u>		
			

The date of each amendment(s)	adoption: March 15, 2010
Effective date if applicable:	(date of adoption is required) MAy 1 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of directions.	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated	7-31-10
Signature	The Infection
(By the	chairman of 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 fiduciary by that fiduciary)
	Lon Von Lintel
;	(Typed or printed name of person signing) President
	(Title of person signing)