

765628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

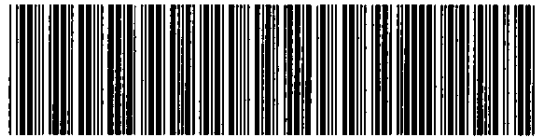
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FILED

09 JUL 17 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend 7/23/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CENTRAL FLORIDA PLEASURE DIVERS

DOCUMENT NUMBER: 765628

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

Please return all correspondence concerning this matter to the following:

LEE CARPENTER

(Name of Contact Person)

CENTRAL FLORIDA PLEASURE DIVERS INC.

(Firm/ Company)

POST OFFICE BOX 536891

(Address)

ORLANDO/FLORIDA 32853 US

(City/ State and Zip Code)

INFO@CFPDDIVERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEE CARPENTER

(Name of Contact Person)

at (407) 402-8785

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

CENTRAL FLORIDA PLEASURE DIVERS, INC.

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

765628

(Document Number of Corporation (if known))

FILED
09 JUL 17 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

408 SOUTH EDGEMON AVENUE

WINTER SPRINGS

FLORIDA 32707 US

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

POST OFFICE BOX 536891

ORLANDO FLORIDA

32853 US

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:

New Registered Office Address:

(Florida street address)

(City)

, Florida

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>CARPENTER, LEE</u>	<u>441 HILLSDALE COURT</u> <u>LAKE MARY, FL 32746</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SD</u>	<u>MARTIN, JAMIE</u>	<u>445 MOFFAT LOOP</u> <u>OVIEDO, FL 32765</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

DIRECTOR AT LARGE WAS REMOVED BY MISTAKE, OUR SECRETARY POSITION
IS VACANT AT PRESENT TIME. OUR PRINCIPAL ADDRESS WAS CHANGED BY
MISTAKE AND OUR MAILING ADDRESS WAS LEFT OFF.
PLEASE ACCEPT THIS AS FINAL AMENDMENT FOR 2009

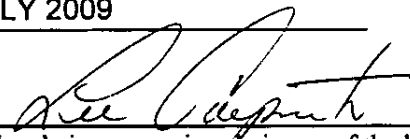
The date of each amendment(s) adoption: 14 JULY 2009
(date of adoption is required)

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

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 14 JULY 2009

Signature 
(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)

LEE CARPENTER
(Typed or printed name of person signing)

DIRECTOR AT LARGE
(Title of person signing)