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ALLAHASSEL FLORIDA

OCT 01 2018 S. YOUNG

COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327 Tallahassee, FL 32314

Amendment Section

Division of Corporations

Division of Corpo	rations				
NAME OF CORPORATION: Six Lakes Country Club Loc DOCUMENT NUMBER: H46042					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	Six Lak 91311 N. Ft	Smith Name of Contact Person Cos Country (Firm/ Company Address Myws FL City/ State and Zip Code Clakes, ne fed for future annual report in	1 lub lnc 0ad 33903		
For further information concerning this matter, please call:					
Dane	Smith	at (239	995 0595		
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)		

Street Address

Amendment Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Div Lakes Coun	try Club by
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
H - 4604	lz
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	W/A ES S
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P 28 M 9: 25
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
Name of New Registered Agent	
tFlorida .	street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	r 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	1	Abshier, Gau	9151 Littleton Rd
Add Remove			N. P. Myus FL 33903
2) Change Add	<u>+</u>	Egeln, Rick	9151 Citileton Rd NiFt Myers FL 33903
Remove	T	Froehlich, Don	9131 Littleton Rd
3) Change	1	110011111111111111111111111111111111111	N. F. Myen FL 33903
Remove			
4) Change			
Add Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach àdditional sheets, if necessary). (Be specific)
NA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. T by the shareholders was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled in	
"The number of votes east for the amendment(s) was/w	rere sufficient for approval
by	.**
by(voting group)	
The amendment(s) was/were adopted by the board of directo action was not required.	rs without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators w action was not required.	ithout shareholder action and shareholder
Dated Sept 25, 2018 Signature Christine 3/	
(By a director, president or other of	ficer – if directors or officers have not been the hands of a receiver, trustee, or other court
Christine B.	Barreti
(Typed or printe	d name of person signing)
Seevet	ing
(Tit	e of person signing)