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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $_$	ITERNATIONAL S	OCIETY OF PALM	1 BEACH, IN	C
N001 DOCUMENT NUMBER:	14 C+	13519	FIN	59-1411929
The enclosed Articles of Amendm	ent and fee are subm	itted for filing.		
Please return all correspondence co	oncerning this matter	to the following:		
JUDITH D. ZERFOSS				
_ .	(Name of Contact Per	rson)	
		(Firm/ Company)	
44 COCOANUT ROW, M207C				
		(Address)		
PALM BEACH, FL 33480				
	(City/ State and Zip C	Jode)	
ISPB@BELLSOUTH.COM				
E-mail	address: (to be used	or future annual repo	ort notification	<u> </u>
For further information concerning	this matter, please c	all:		
JUDITH D. ZERFOSS		ut _	561	832-4200
(Name	of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the followi	ng amount made pay	able to the Florida D	epartment of :	State:
S35 Filing Fee	. 3.75 Filing Fee & Certificate of Status	2843.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Cerm	0 Filing Fee icate of Status ied Copy tional Copy is ssed)
Mailing Address Amendment Sectorision of Corp P.O. Box 6327 Tallahassee, FL	ion orations	Am Div Clif	eet Address endment Secti ision of Corpo ton Building 1 Executive C	orations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

INTERNATIONAL SOCIETY OF PALM BEACH, INC.

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
N00114	
(Document No	iumber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Staumendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:
	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
	18 AA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	JUH 2
	FEE PE
	- ONE 2: 0
 If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered offi 	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am	ered Agent: om 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>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>T</u>	KIMBERLY S. FROHLING	255 SOUTH COUNTY RD
Add X Remove			PALM BEACH, FL 33480
2) Change	Т	ROLAND C MANUEL	44 COCOANUT ROW, STE T5
X Add			PALM BEACH, FL 33480
Remove 3) Change	VP	ADRIANA M LUCHECHKO	686 FERN STREET
X AddRemove			WEST PALM BEACH, FL 33401
4) Change Add Remove		 	
Change Add			
Remove 6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	. (Be specific)				
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The date of each amendment(s) add date this document was signed.	6/1/2018 option:	, if other than the
Effective date <u>if applicable</u> :	6/1/2018 (no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s) The amendment(s) was/were adwas/were sufficient for approval	(CHECK ONE) opted by the members and the number of votes cast for the amen l.	idment(s)
adopted by the board of director		is/were
Dated	uh Dzerjase, Eyec Decy	
(By The chairt have not bee	man or vice charman of the board, president or other officer-fit den selected, by an incorporator – if in the hands of a receiver, trus appointed fiduciary by that fiduciary)	
	TUDITH D. ZERFOSS (Typed or printed name of person signing)	
	BOARD EXEC SECY	

(Title of person signing)