N01320

(I	Requestor's Name)	
. (/	Address)	
(,	Address)	
(1	City/State/Zip/Phone #)	
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((Business Entity Name)	
(1	Document Number)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	OAKS CLUB CORPO	ORATION		
DOCUMENT NUMBER: _	NO1320			
The enclosed Articles of Am	endment and fee are submi	tted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
Jeff Hartigan				
	C	Name of Contact P	'erson)	
The Oaks Club				
	•	(Firm/ Compan	y)	···
301 MacEwen Drive				
		(Address)		· · · · · · · · · · · · · · · · · · ·
Osprey, FL 34229				
	((City/ State and Zip	Code)	
jhartigan@theoaksclub.co	m			
E-	mail address: (to be used f	or future annual re	port notification	
For further information conce	eming this matter, please ca	all:		
Jeff Hartigan		a	941	966-6717
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made paya	able to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	343.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	O Filing Fee cate of Status and Copy cional Copy is sed)

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

	of	
OAKS CLUB CORPORATION		
(Name of Corporation as curr	ently filed with the Florida Dept. of Sta	ate)
NO1320		
(Document Nur	nber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For Profit Corpord</i>	ation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
NA		The new
name must be distinguishable and contain the word "corpo." "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbrev	iation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u>(\$</u>)	
C. Farman mailing address if any inchia		屋とす
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	M/A	A C
		m = 18
		
		<u> </u>
D. If any disc the majetaned court and/or a sistered at		RET TO
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		or the
Name of New Registered Agent:	NA	
	(Florida street address	7)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent	
I hereby accept the appointment as registered agent. I am		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>Mike</u>	Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>Mr.</u>	Carl Koch, DP	301 MacEwen Dr.
Add			Osprey, FL 34229
X Remove			
2) Change	Mr.	Robert Keller, DT	301 MacEwen Dr.
Add X Remove			Osprey, FL 34229
3) Change	Mrs.	Carolyn Butler, D	301 MacEwen Dr.
Add			Osprey, FL 34229
Remove			
4) X Change	Mr. DV	Michael Lonier, DV	301 MacEwen Dr.
Add			Osprey, FL 34229
Remove			
5) X Change	W. Db	Terry Tubaugh, DP	301 MacEwen Dr.
Add			Osprey, FL 34229
Remove			
6) X Change	Mr. D	Doug Casey, D	301 MacEwen Dr.
Add			Osprey, FL 34229
Remove			

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	V Mike	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Mr. DT	Samuel Strickland, DT	301 MacEwen Dr.
X Add			Osprey, FL 34229
Remove			
2) Change	M.D	Paul Beggan, D	301 MacEwen Dr.
X Add			Osprey, FL 34229
Remove			
3) Change	MA	Michael Wallace, D	301 MacEwen Dr.
X Add			Osprey, FL 34229
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

If amending or adding additional Articles (attach additional sheets, if necessary). (E.	Be specific)
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April 5, 2018	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendmen was/were sufficient for approval.	t(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	:
/_/	
Dated	
Signature (By the chairman or vice chairman of the board, president or other officer-if directors)	rs
have not been selected, by an incorporator - if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
Terry Tubaugh	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_