## NO200000480

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Amend

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#Roberts MAR 11/5/2010

## **COVER LETTER**

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P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section Solvision of Corporation				
Division of Corporation	ons.	하는 경우 (1) 16 년 - 기타 등 (3) 2017		
			_	
NAME OF CORPORATIO	N: Miami	Coconi	of Grove I	rack Club Dric
		Chic will		
DOCUMENT NUMBER: _	<u> Noace</u>	00004	80	
The enclosed Articles of Ame	endment and fee are	submitted for	filing.	
Please return all corresponder	nce concerning this	matter to the f	ollowing:	
C	Karien	BU	all	
	(Nam	e of Contact P	erson)	<del></del>
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For further information conce	erning this matter, p	lease call:		
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okazen Bot	Jall	at (	<b>964</b> ) 252.	-6592
(Name of Cont	act Person)			ne Telephone Number)
Enclosed is a check for the fo			he Florida Departmen	t of State:
\$35 Filing Fee  \$4	3.75 Filing Fee &	 □\$43	3.75 Filing Fee &	□ \$52.50 Filing Fee
	ficate of Status	Certif		Certificate of Status
			tional copy is	Certified Copy
		enclo	sea)	(Additional Copy is enclosed)
Mailing Addr	<u>ess</u>	Substantial	Street Address	·
Amendment S	ection the	SHE WAS	Amendment Section Division of Corporation	nne

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment  10 MAR 12 AM 11:4
Articles of Amendment 10 Map 10 Map
Articles of Incorporation
of The law will: 4
Mich Con + Carre To L Club TOSEE STATE
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 3510 Thow Allenne
Miani 4 33133
Control of the Contro
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: Lanen B
A second
35:10 trow Muenus
New Registered Office Address: (Florida street address)
riam, 81 , Florida 33133
(City) (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.
Ham Whall
Signature of New Registered Agent, if changing

Page 1 of 3

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>	l y sabita sa	Address	Type of Action
<u>VP</u>	Ernest T. Jes	nkins :	12011 BW119th Plac Miani 4 1 33186	Add Remove
Ta_	Linberty Da	iis .	37368 SW 80 Plaza GAL170 Miani FF 33143	Add Remove
P.D.d.	Karen BH-11		3510 Fran Avenue Migny FT 33133	Add Remove
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E. If amending (attach ada	ng or adding additional Ar litional sheets, if necessary).	ticles, enter ( (Be specifi	chánge(s) here:	
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The date of each amendment(s) adoption: February 18,2010	
Effective date if applicable: (date of adoption is required)	
(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 Blanch 9,2010	
Signature are Tall	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator—if in the hands of a receiver, trusted other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President Director (Title of person signing)	

Page 3 of 3

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