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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORP USA Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN TIGER FUND, INC.

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JAN 18 2018

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: TIGER FUND, INC
DOCUMENT NUMBER: NO200003760
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
JOHN VENEZIL
(Name of Contact Person)
TIGER FUND, INC.
(Firm/ Company)
934 N. University Drive, #451
(Address)
CORAL SPRINGS, FLORIDA 33071
(City/ State and Zip Code)
VENEZ40@bellsouth. WET
E-mail iddress: (to be used for future annual report notification)
For further information concerning this matter, please cell:
JOHN VENEZIA (954) 328-4751
(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:
S35 Filing Fee Criticate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 112314 Street Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 112314 Street Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 112314

Articles of Amendment to Articles of Incorporation of

TIGER FUND INC					
(Name of Corporation	as currenti	y filed with the Flo	rida Dept. of State)		
NOS 000003.160					
(Docum	nent Number	of Corporation (if I	mown)		
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of In corporation:	rida Statutes,	this Florida Not Fi	or Profit Corporation e	idopts the foll	owing
A. If amending uams, enter the new came of the			į		•
FLORIDA ORGALITRANSP	アマヤブ	ASSOCIAT	JOH, INC.	<i>Th</i> r	е леж
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporatio <u>L</u>	n" or "incorporate	d" or the abbreviation	"Corp. " or ".	Inc."
B. Enter new principal office a ldress, if applicate (Principal office address MUST, BE A STREET A.					_
	-				
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE I	<u>30x</u>)	·			
	_				
D. If amending the registered a zent and/or registered agent and/or the new registered Name of New R :gistered Agent:	tered office ed office add	address in Florida. Iress:	enter the name of the	<u> </u>	
Hane DI WENT SEDICIEN ARCHI.					
New Registera 1 Office Address:		Œ	orida street address;		<u> </u>
·			Florida		
		(Cip)		Code)	 .
New Registered Agent's Signaty re, if changing Re I hereby accept the appointment as registered agent.	toistered Ac I am famil	tent: iar with and accept	(Zip (Code) Position	 ,
New Registered Agent's Signaty re, if changing Re I increby accept the appointment as registered agent.	I am famil	tent: iar with and accept	(Zip (the obligations of the p	Code) Position	

If amending the Officers and/o '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 I inancial Officer. If an officer/director holds more than one title, itst the first letter of each office hold. President, Treasurer, Director would be PTD.

Changes should be noted in the fo'lowing manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the curporation. 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 Saily Smith, SV as an Add.

Example: X_Change X_Remove X_Add	Y Mik	n Doe te lanes y Sanith	
Type of Action (Check One)	<u>Tide</u>	Name	<u>Addres</u> s
1) Change	 -		
Add			
Remove			
2)Change	 .		
Add			
Remove			
3)Change			
Add			
Remove			
4)Change			
Add			
Remove		•	
wl			_
5) Change			
Add			
Remove			
o)Change			
Add			
Remove			
		Page 2 of 4	

If amending or adding s (attach additional sheets,	f në ressary). (Be specij	fic)		
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Page 3 of 4

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
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 filling requirements, a document's effective date on the Department of State's records.	his date 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 an was/were sufficient for approval.	readment(s)
There are no members or members carifiled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	washwere
Dexed 1/17/18	
Signature Oversa	
(By the ch'simpartir vice chairman of the board, president or other officer-in have not been selected, by an incorporator — if in the hands of a receiver, to other court appointed fiduciary by that fiduciary)	
JOHN VENEZIA	·
(Typed or printed name of person signing)	
EXECUTIVE DIRECTOR	
(Title of person signing)	

Page 4 of 4