N03000006097

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		i :
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Office Use Only



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09/09/13--01013--010 **35.00

FILED

13 OCT -4 AM 8: 39
SECRETARY OF STATE
AND ASSEED FROM

C. LEWIS

OCT 8 2013

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: West Co	ast Musc	le C	Car Club
DOCUMENT NUMBER: NO300006	6097		
The enclosed Articles of Amendment and fee are sub	omitted for tiling.		
Please return all correspondence concerning this matt	ter to the following:		
Nikki Novotny			
	(Name of Contact	Person)
West Coast Muscle Car	Club		
	(Firm/ Compa	any)	***************************************
P.O. Box 990248			
	(Address))	
Naples, Florida 34112			
	(City/ State and Zi	ip Code)
skoish@aol.com			
E-mail address: (to be use	d for future annual i	report n	otification)
For further information concerning this matter, please	e call:		•
Nikki Novotny	a(23	9	417-0929
(Name of Contact Person)	(<i>/</i>	Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florid	ia Depai	rtment of State:
■ \$35 Filing Fee	_		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314]	Amendi Division Clifton 2661 Ex	Address nent Section of Corporations Building secutive Center Circle ssee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2013

NIKKI NOVOTNY / WEST COAST MUSCLE CAR CLUB INC P.O. BOX 990248 NAPLES, FL 34112

SUBJECT: WEST COAST MUSCLE CAR CLUB, INC.

Ref. Number: N03000006097

We have received your document for WEST COAST MUSCLE CAR CLUB, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 713A00021828

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation

FILED

lorida Dept. of State)	13 OCT -4 AM 8: 39	
	SECRETARY OF STATE TALLAHASSEE FLORIDA	
Corporation (if known)	- LORIDA	
ites, this <i>Florida Not For F</i>	Profit Corporation adopts the follow	
<u>ition:</u>		
ation" or "incorporated" o	The r or the abbreviation "Corp." or "In	
4025 Lupine L	ane	
Naples, Florida	a 34112	
P.O. Box 9902	248	
Naples, Florid	a 34112	
address:	ter the name of the	
ne Lane		
(Florida street address)		
	, Florida 34112	
<i>)</i>)		
	Ation: ation" or "incorporated" of the second of the seco	

Page 1 of 4

, 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 <math>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 Mil	n <u>Doc</u> Ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	P	Wayne Wilmoth	P.O. Box 990248
Add			Naples, Florida 34116
X Remove			
2) Change	<u> </u>	Ron Maglothin	P.O. Box 990248
Add			Naples, Florida 34116
X Remove			
3) Change	<u>P</u>	Ron Torp	P.O. Box 990248
X Add			Naples, Florida 34116
Remove			
4) Change	<u>V</u>	Dave Stonish	P.O. Box 990248
X Add			Naples, Florida 34116
Remove			
5) Change	S	Judy Ek	P.O. Box 990248
X Add			Naples, Florida 34116
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	

	date of each amendment	• •		, if other than the
	this document was signed ctive date if applicable:	X	FILED	
	<u>н прриоволо</u> .	(no more than 90 days after am	endment file date)	•
			13 OCT -4 AM 8: 39	
Ado	ption of Amendment(s)	(CHECK ONE) were adopted by the members and the number	SECRETARY OF STATE	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number proval.	r of votes east for the amendment(s) RIDA	
	There are no members or adopted by the board of o	members entitled to vote on the amendmen lirectors.	(s). The amendment(s) was/were	
	Dated Se	otember 7, 2013		
	Signature	Ville Donoth	ī.L	
	have i	chairman or vice chairman of the board, prototo been selected, by an incorporator — if in court appointed fiduciary by that fiduciary)		
	Nikki D). Novotny		
		(Typed or printed name of person sig	ning)	
	Treasu	rer		
		(Title of person signing)		