## 103440

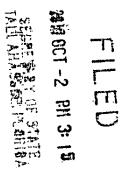
(Req	uestor's Name)		
bbA)	ress)		
(Add	ress)		
(City	/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates	s of Status	
Special Instructions to F	iling Officer:		

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Amend

OCT 0 2 2017
I ALBRITTON

## COVER LETTER

**TO:** Amendment Section Division of Corporations

•	
NAME OF CORPORATION: PARK Jac	nd Horseman's Association p Twe
DOCUMENT NUMBER:	3440
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Sazie Cook	(Name of Contact Person)
PARKland Horse	(Firm/ Company)
	(Firm/ Company)
6248 N.W.43"	Street
	(Addices)
Coral SpA	(City State and Zip Code)
·	(City/ State and Zip Code)
SUZIEL COOK GOT	Mail, Corond for future annual report notification)
For further information concerning this matter, please	e call:
Sazie Cook	n) at $\frac{954}{\text{(Area Code)}}$ (Daytime Telephone Number)
Enclosed is a check for the following amount made p	
\$35 Filing Fee	D\$43.75 Filing Fee & S52.50 Filing Fee Check  Certified Copy Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section	Amundment Soution

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



September 21, 2017

SUZIE COOK 6248 NW 43RD ST CORAL SPRINGS, FL 33067

SUBJECT: PARKLAND HORSEMAN'S ASSOCIATION, INC.

Ref. Number: N03440

We have received your document for PARKLAND HORSEMAN'S ASSOCIATION, 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):

You failed to make the correction(s) requested in our previous letter.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

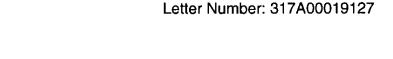
The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Irene Albritton Regulatory Specialist II







## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 5, 2017

SUZIE COOK 6248 NW 43RD ST CORAL SPRINGS, FL 33067

SUBJECT: PARKLAND HORSEMAN'S ASSOCIATION, INC.

Ref. Number: N03440

**PARKLAND** HORSEMAN'S We received your document for ASSOCIATION, 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):

Please complete/submit the document in its entirety.

all filled out the way you heed it! Hopefully

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.

Irene Albritton Regulatory Specialist II

Letter Number: 017A00018239

## Articles of Amendment to Articles of Incorporation of

PANKland Horseman	n's Association	n, inci
(Name of Corporation a	s currently filed with the Florida	Dept. of State)
Nos	3440	
(Docume	ent Number of Corporation (if know	vn)
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the o	corporation:	
$\sim$	/A	The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	"corporation" or "incorporated" o	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab		
(Principal office address <u>MUST BE A STREET AD</u>	6248 N.C	U. 43'-d Street
	CORAL S	pangs Fl 33067
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ox) <u>UZ48 N.U</u>	U. 43 - Street
	Consl Sp	
	·	33067
D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent:		ter the name of the
-	43	
New Registered Office Address:	, rrona	la street address)
	$\lambda/A$	Die al. da
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:	
! hereby accept the appointment as registered agent.		obligations of the position.
	NA	I
<del></del>	Signature of New Registere	nd Agent, if changing
	Page 1 of 4	007-2 P

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>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) 🗶 Change	_P_	Sally Mitchell	9577 Cinnamon Court Flasor
X Add	P	Suzie Cook	6248 N.W. 4374 St. Coral Springs 33067
_X Remove	P	Sally Mitchell	9577 Cinnamon Court Perbland Fl 33076
2) Change			
_X_ Add	$\vee$	Gillian Moie	6220 N.W 10th St. Margate 33063.
Remove			A
3 ) Change			
<u> </u>	T	Janet Nathan	2991 N.W. 106 Ave Coral Springs "
Remove			
4) Change			<del></del>
<b>X</b> Add	5	sally Mitchell	9577 Cinnamen Court Pulland
Remove	(	·	33076
5) Change	A section	<u></u>	
_★_ Add		Lori Wilson	6000 N.W 62th way Dorhland 33067
Remove			
6) Change	D		
Add	<u> </u>	Tolling	21104 Shady Vista Long Bock Raten
Remove	navie	. Jebbrey r Bell	21104 Shady Vista Lone Boca Paten 33428
Kelliove	tieaine	Page 2 of 4	37.44

E. If amending or adding additional Articles, enter change(s) here:
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
$\sim$ $\chi/A$
· ·
77-77-77-77-77-77-77-77-77-77-77-77-77-
The state of the s

	e date of each amendment(s) adop this document was signed.	otion:	, if other than the
Effe	ective date if applicable:		
·	<del></del> -	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Depa	does not meet the applicable statutory filing requirements, this date wirtment of State's records.	Il not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
×	The amendment(s) was/were ado was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s	)
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated 9/2	7/17	
	Signature	Jonne Cool	
	have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Sui	canne look	
		(Typed or printed name of person signing)	
		President of PHA	
		(Y)tte of person signing)	