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Amendice

JUN 26 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations	et uu
NAME OF CORPORATION: Central	Florida Panthers, Inc.
DOCUMENT NUMBER: NO 4000	0004632
The enclosed Articles of Amendment and fee are submi	itted for filing.
Please return all correspondence concerning this matter	to the following:
Chris Smil	Name of Contact Person)
Central Florida	Panthers, Inc.
	(Time company)
310 Kid Ellis	(Address)
Mulberry, FL 3	,
Chrissmith 1934	@ gmail. Com for future annual report notification)
For further information concerning this matter, please or	
Sonya H. Keed	at 863-409-4252
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay-	
Certificate of Status	E\$43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

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

Articles of Amendment

to

Articles of Incorporation

71111111	of	
Central Florida Po	others. Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of Star	te)
NO 400000 4632	-	
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corpora	tion adopts the following
A. If amending name, enter the new name of the corporation	on:	
NIA		The new
name must be distinguishable and contain the word "corporati "Company" or "Co," may not be used in the name.	on" or "incorporated" or the abbrevio	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
	<u> </u>	. 20
C. Enter new mailing address, if applicable:		<u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)	<i>NJA</i>	
	, 	à
		ند بند سند د د د
D. If amonding the resistance and another section 1. ft.		of the U
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	dress:	of the Ch
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Florida street address)	
		lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	sgent: iliar with and accept the obligations of	f the position.
	Alla	·
Sic	nature of New Registered Agent, if cha	maina
· · · · · · · · · · · · · · · · · · ·	by , rickister ca rigera, if the	"'&'''&

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	Treasurer	Murphy, Stephanie	215 Lime St Mulberry, Fz 33860
2) X Change	TR	Reed, Sonya	1098 Demetree Dr Lakeland, Fi 33811
Remove 3) Change Add Remove	Treasurer	Castle, Carrie	14822 Heronglen Dr Lithia, FC 33547
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or add attach additional sh	ing additional Articleets, if necessary). (es, enter change((Be specific)	s) here:		
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The date of each amendment(s) ad date this document was signed.	loption:May 1, 2019	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes cast for all.	or the amendment(s)
There are no members or memb adopted by the board of director	pers entitled to vote on the amendment(s). The amendors.	ment(s) was/were
Dated	May 30, 2019	
Signature	School	
have not bee	man or vice chairman of the board, president or other en selected, by an incorporator – if in the hands of a re appointed fiduciary by that fiduciary)	
	Sanya A. Reed	
	(Typed or printed name of person signi	ing)
	Trustee	
	(Title of person signing)	