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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FLORIDA S	PORTSMENS	LAND TRUST, INC.
DOCUMENT NUMBER: NO400007	926	
The enclosed Articles of Amendment and fee are subr	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
DAVID W. WILCOX		
	(Name of Contact Person)
DAVID W. WILCOX, AT	TORNEY	
	(Firm/ Company)	
308 13TH ST. W.		
	(Address)	
BRADENTON, FL 34205	5	
	(City/ State and Zip Code	2)
dwilcox@wilcox-la		
E-mail address: (to be used	•	notification)
For further information concerning this matter, please		
David W. Wilcox	_{at (} 941	746-2136 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLORIDA SPORTSMENS' LAND TRUST, INC.	;
(Name of Corporation as currently filed with the Florida Dept. of State)	
N0400007926	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> admendment(s) to its Articles of Incorporation:	THE TAX
. If amending name, enter the new name of the corporation:	
FLORIDA SPORTSMEN'S LAND TRUST, INC.	The new
ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation " Company" or "Co," may not be used in the name.	
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	<u></u>
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
. 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:	
(Florida street address)	
New Registered Office Address:	
, Florida	
(City)	(ip Code
lew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the pe	osition.
Signature of New Registered Agent, if changing	
Digitalian o of them hegistered rigers, if changing	

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 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	PT V SV	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	Name		<u>Addres</u> s
1) Change Add Remove	- , , , , , , , , , , , , , , , , , , ,			
2) Change Add Remove		<u> </u>		
3) Change Add Remove				
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove	*****			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
4	
	······

The	date of each amendment	t(s) adoption: JANUARY 15, 2015	, if other than the
	ate this document was signed. Strective date if applicable: JANUARY 15, 2015		
		(no more than 90 days after amendment file date)	_
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	Dated JAN Signature (By the have rother of the second sec	separation of the board president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	DAVID	W. WILCOX	
		(Typed or printed name of person signing)	
	PRESI	DENT	
		(Title of person signing)	