N05000000367

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MAY 0 4 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	CLUB 62, INC DN:			
DOCUMENT NUMBER:	N05000000367			
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matte	r to the following:		
ELIZABETH MALLOWS				
		(Name of Contact Perso	n)	
CLUB 62				
		(Firm/ Company)		
6050 BABCOCK ST SE, SI	JITE 20			
		(Address)		
PALM BAY, FL 32909				
	:	(City/ State and Zip Cod	le)	
liznit1961@yahoo.com				
.	-mail address: (to be used	for future annual report	notification	1)
For further information conc	erning this matter, please	call:		
Liz		90 at	8	809-3314
	(Name of Contact Person)	(Ar	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida Depa	artment of	State:
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif (Addi	0 Filing Fee icate of Status ied Copy tional Copy is osed)
P.O. Box 6	nt Section f Corporations	Ameno Divisio Clifton 2661 E	Address diment Sect on of Corpo Building Executive Cassee, FL 3	orations Center Circle

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Articles of Amendment to Articles of Incorporation of

CLUB 62, INC		
(Name of Corporation	as currently filed with the Fl	orida Dept. of State)
DOCUMENT # N05000000367		
(Docum	nent Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	! "corporation" or "incorporat <u>:</u>	ted" or the ahbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:	
(Principal office address MUST BE A STREET A	DDRESS)	till till till till till till till till
		大
		XX
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	DOV)	7 m² C13 ⊃
Muning university MAT DE ATOST OFFICE I	<u></u>	es
		<u> </u>

	<u> </u>	
D. If amending the registered agent and/or regis		a, enter the name of the
new registered agent and/or the new register	ed office address:	
Name of New Registered Agent:	ELIZABETH MALLOWS	
	6050 BABCOCK ST, STE 20	PALM BAY, FL 32909
		(Florida street address)
New Registered Office Address:		,
		Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen		pt the obligations of the position.
	Elizabeth	Mallows
_	Signature of New Reg	istered Agent, if changing

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>	<u>Addres</u> s
1) Change	PD	CIRCOSTA, RICHARD	6050 BABCOCK ST SE
Add			SUITE 20
X Remove			PALM BAY, FL 32909
2) Change	PD	KILEEN, JOHN	6050 BABCOCK ST SE
X Add		•	SUITE 20
Remove			PALM BAY, FL 32909
3)Change	DV	MCDERMOTT, TIMOTHY W	6050 BABCOCK ST
Add			SUITE 20
X Remove			PALM BAY, FL 32909
4) Change	VD	SHERRY SANDALER	6050 BABCOCK ST SE
X Add			SUITE 20
Remove			PALM BAY, FL 32909
5) Change	DT	WEST, JOHN R	6050 BABCOCK ST
Add	31.31.31.31.31.31.31.31.31.31.31.31.31.3		SUITE 20
X Remove			PALM BAY, FL
6) Change	TD	MALLOWS, ELIZABETH	6050 BABCOCK ST SE
X Add			SUITE20
Remove			PALM BAY, FL 32909

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.

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Example: X Change X Remove X Add	\overline{V} Mik	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	DS	LAWSON, LINDA H	6050 BABCOCK ST SE
Add			SUITE 20
x Remove			PALM BAY, FL 32909
2) Change	SD	HUTCHINSON, ERICA	6050 BABCOCK ST SE
X Add			SUITE 20
Remove			PALM BAY, FL 32909
3) Change	TR	HUTCHINSON, BRENT	6050 BABCOCK ST SE
X Add		•	SUITE 20
Remove			PALM BAY, FL 32909
4) Change	TR	ROSA, CHRIS	6050 Babcock St SE
X Add			SUITE 20
Remove			PALM BAY FL 3290
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	date of each amendment(s) adoption: Ovil 12 Section 2016 if other than the
	this document was signed.
Effe	cetive date if applicable: Opid 12 2016 (no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ament's effective date on the Department of State's records.
Ado	option of Amendment(s) (CHECK ONE)
22	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated <u>April 20, 2016</u>
	Dated Opril 20, 2016 Signature Clizabeth Mallows En
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Elizabeth Mallows
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)