

N05000001743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

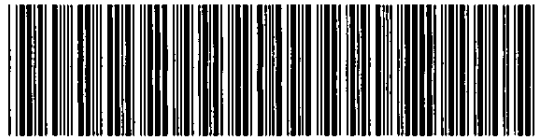
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500138159285

12/01/08--01064--019 **43.75

FILED

08 DEC -1 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
12/1/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IR-RU FAMILY SOCIAL CLUB, INC.

DOCUMENT NUMBER: N05000001743

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BARBARA S. WALSH

(Name of Contact Person)

IR-RU FAMILY SOCIAL CLUB, INC.

(Firm/ Company)

9211 SOUTH FLORIDA AVENUE

(Address)

FLORAL CITY, FLORIDA 34436

(City/ State and Zip Code)

For further information concerning this matter, please call:

BARBARA S. WALSH

(Name of Contact Person)

at (352) 637-5118 (Mon. 9-11:30 am)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$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

Street Address

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

**Articles of Amendment
to
Articles of Incorporation
of**

IR-RU FAMILY SOCIAL CLUB, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

N05000001743

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article III, a, delete 501(c)3; add 501(c)4

Article III, b, delete 501(c)3; add 501(c)4

Article VI, paragraph 3, line 2, delete March 5, 2008; add June 7, 2009

Article VI, paragraph 4, line 4, delete March; add June

Article VI, names and residential addresses of persons who serve on Board of Directors:

delete Norman Shimer; delete Barbara Walsh; delete Katie Lynn Benton;

add: Gary Luttrell--6764 E. Falcon Rest Lane, Inverness FL, 34452

add: April Wonser--6889 W. Borstein Court, Crystal River FL, 34429

add: Sandra Lee --7948 E. Peacock Lane, Floral City, FL. 34436

Article VIII, pertaining to change in officers; delete Brenda Lentz, Secretary; delete Robert F. Lentz, Treasurer

add: Secretary, Wendy Wilber, 5959 E. Urban Lane, Floral City, FL 34436

add: Treasurer, Barbara S. Walsh, 9505 E. Village Green Circle, Inverness, FL 34450

Article XI, line 5, delete 501(c)3; add 501(c)4

(Attach additional pages if necessary)
(continued)

FILED
08 DEC -1 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: Sunday, November 2, 2008

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ 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 November 2, 2008

Signature Harley T. Jeffries
(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)

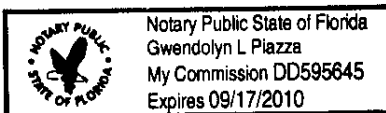
Harley T. Jeffries
(Typed or printed name of person signing)

President
(Title of person signing)

STATE OF FLORIDA
COUNTY OF CITRUS

SWORN TO AND SUBSCRIBED BEFORE ME, the undersigned officer,
personally appeared HARLEY T. JEFFRIES, known to me to be the
person whose name is subscribed to the within instrument or who has produced
DL as identification and acknowledged
that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have set my hand and official seal on
the 21 day of November, 2008.



Gwendolyn L. Piazza
SIGNATURE OF NOTARY PUBLIC

Gwendolyn L. Piazza
TYPED OR PRINTED NAME OF NOTARY PUBLIC

COMMISSION NO. DD 595645
My Commission Expires: