## N06 000004643

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

La.429-1092-



000380790830

Cr\_ צבטבוויוב

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Sun shine Chapter Antique motorcycleclub In
DOCUMENT NUMBER: NO600004643
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JDAIN Kreller (Name of Contact Person)
(Name of Confact Person)
(Firm/ Company)
1046 JUNE TERRACE (Address)
(**************************************
DAYTONG Beach, Fl 32119 (City/ State and Zip Code)
(City/ State and Zip Code)
JGS49 L @ AOL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joann Kreiler at 386 - 341 - 7220  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

2022 FEB 28 PM 1:30

SECRETARY OF SYATE TALLAHASSEE, FL

February 11, 2022

JOANN KRELLER 1046 JUNE TERRACE DAYTONA BEACH, FL 32119

SUBJECT: SUNSHINE CHAPTER ANTIQUE MOTORCYCLE CLUB, INC.

Ref. Number: N06000004643

We have received your document for SUNSHINE CHAPTER ANTIQUE MOTORCYCLE CLUB, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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.

Claretha Golden Regulatory Specialist II

Letter Number: 922A00003497

## Articles of Amendment to Articles of Incorporation of

Sunshine Chapter An	Tique MotoReide Clubine
(Name of Corporation as currently filed with the Florida D	ept. of State)
Ndo 00000 4643	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
the distinction of contain the word "corrected	The new ion" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	ton or incorporated of the dooreviation Corp. or inc.
	_
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Day Tong Beach, F. 1 32119
	Day Tona Beach, F. 1 32119
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
	<del></del>
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	(1 II) IN SIFEE MAN COSY
	. Florida
<del></del>	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accept the obligations of the position.
Si	gnature of New Registered Agent, if changing
	202: SEC TA
	AC 23

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 John Doe  V Mike Jones  SV Sally Smith		
Type of Action (Check One)	<u>Title</u> <u>Name</u>		<u>Addres</u> s
l) <u>X</u> Change Add	vp <u>mike</u>	Gleeson	313 Rio Pinar DR Ormond Beach, Fl
2) X Change Add	SecreTARY PAlme	R CREILIN	ORMON Beach, Fl 32174
Dibn Remove  3) X Change Add Remove	TREASURER JOAns	reller	DAYTONA BEACH, E1 32119
4) Change Add	chiefJudge FRAn	K Li pinski	1037 JACARANDA CIR ROCKLEDGE, FI 32955
Remove  5) Change Add	TRUSTEE JOHN	Blood	HOI Division ST DRM and Beach, F132
6) Remove Add	TRUSTEE VICTOR	G HARAISUR	3241 Riverview Ln PORT ORange, Fl 32127
	adding additional Articles, enter chang I sheets, if necessary). (Be specific)	e(s) here:	
	-		

7) TRUSTEE Change FRANK ZISA

Dipole TRUSTEE COMB) Joseph Gimpel JR

661 Aldenham Lane orm and Beach, F132114

803 GATE PARK DR DAYTona Beach, FI 32114

Diditionard OFFICER/DIRECTOR

ERIK Dunk

102 SPIEDMONT AUE PORT DRange, F132129

	, . ·
•	
<u> </u>	
	<del></del>
	<del></del>
· · · · · · · · · · · · · · · · · · ·	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	January 25, 2022
Signature	Jan Kruler
•	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)
	JOANN Kreller
	(Typed or printed name of person signing)
	TREASURER