## N0600005579

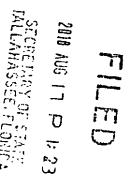
(Re	questor's Name)	
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AUG 2 0 2018

## COVER LETTER

TO: Amendment Section Division of Corporations

FLORIDA STATE UNAME OF CORPORATION:		-	
N06000005579 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
KATHERYN M. AUTON			
	(Name of Contact Per	·son)	
FLORIDA STATE USBC, INC.			
	(Firm/ Company	)	
P. O. BOX 1166			
	(Address)	·	
DADE CITY, FLORIDA 33526-1166			
	(City/ State and Zip C	lode)	
FLORIDASTATEUSBC@GMAIL.COM			
E-mail address: (to be used	for future annual repo	ort notification	
For further information concerning this matter, please	call:		
KATHERYN M. AUTON	at	352	521-3660
(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida D	epartment of S	State:
☐ \$35 Filing Fee		Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address  Amendment Section		eet Address endment Secti	ion
Division of Compantions	* * * * * * * * * * * * * * * * * * * *	lalan af Cama	

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



August 8, 2018

KATHERYN M AUTON P.O. BOX 1166 DADE CITY, FL 33526-1166

SUBJECT: FLORIDA STATE UNITED STATES BOWLING CONGRESS

WOMEN'S BOWLING ASSOCIATION, INC.

Ref. Number: N06000005579

We have received your document for FLORIDA STATE UNITED STATES BOWLING CONGRESS WOMEN'S BOWLING ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

What are you doing with Carolyn Redman?

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.

Letter Number: 218A00016342

Tracy L Lemieux Regulatory Specialist II

**~**.

Articles of Amendment Articles of Incorporation  $\alpha \mathbf{f}$ 

FLORIDA STATE USBC WBA, INC.	ntly filed with the Florida Dept. of State)	
N06000605579 (Document Numb	her of Corporation (if known)	
	tes, this Florida Not For Profit Corporation adopts the followin	3
A. If amending name, enter the new name of the corporate FLORIDA STATE USBC, INC.	ation: The nev	ı,
FLORIDA STATE USBC., INC	ation" or "incorporated" or the abbreviation "Corp." or "Inc	•
name must be distinguishable and comfain the work—corpora "Company" or "Co." may not be used in the name.	,	
_	37108 MERIDIAN AVENUE	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>		_
		_
C. Enter new mailing address, if applicable:	P. O. BOX 1166	
C. Enter new maining address, it appareames		
(Mailing address MAY BE A POST OFFICE BOX)	DADE CITY, FLORIDA 33526-1166	-
(Mailing address MAY BE A POST OFFICE BOX)  D. Hamending the registered agent and/or registered of	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the	 
(Mailing address MAY BE A POST OFFICE BOX)  D. Hamending the registered agent and/or registered of new registered agent and/or the new registered office	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the c address:	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent.	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the e address:	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the e address:  (Florida sneet address)	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent.	ffice address in Florida, enter the name of the c address:  (Florida sneet address)	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent.	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the caddress:  (Florida su cer address)  Florida (City) (Zip Code)	
D. Hamending the registered agent and/or registered of new registered agent and/or the new registered office.  Name of New Registered Agent.  New Registered Office Address:	DADE CITY, FLORIDA 33526-1166  ffice address in Florida, enter the name of the caddress:  (Florida su cer address)  Florida (City) (Zip Code)	

(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 PID

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the 3. There is a change. Mike Jones leaves the corporation, Sally Smith is named the Y and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as on Add

Example: <u>X_C</u> hange <u>X_Remove</u> X_Add	<u>V</u> <u>Mi</u>	nn Doc ike Jones Ily Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
	i)	CAROLYN REDMAN	520 COLEMAN DR., S.E.
1) Change			WINTER HAVEN, FL. 32170
Add			
XRemove			
2) Change	р	GEORGE GIBSON	P. O. BOX 841
X Add			STUART, FL 34995
Remove	V	SCOTT TICE	8590 S.W 66TH FERRACE
3 ) Change X			OCALA, FL. 34476
X Add Remove			
	V	TONI MADDUX	36 IESLIE LANE
4) X Change			PORT ORANGI.
Add			
	()	DONNA OBERG	731 CONCH SHELL MANOR
5) X Change			PLANTATION, FL 33324
Add			
	D	DEBBIE WHITTEN	3810 S.E. 4TH ST.
6) Change Add			OCALA, FL 34471
Remove			

(Attach additional sheets, if necessary)

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Example: X_Change X_Remove X_Add	<u>y</u> <u>Mi</u>	<u>nn Doe ke Jones</u> Ilv Smith	
Type of Action (Check One)	<u>Titic</u>	Name	Address
	SGT.	DALIA KEYÉS	1906 MEADOWRIDGE DR.
1) X Change			VALRICO, FL 33596
Add			
Remove			
2) X Change	D	MARYANN ADKINS	HII6 DORA AVE.
Add	-		TAVARES, FL 32778
Remove		ROBERT PETERS	520 GRANT AVE.
3) _ Change	<del>D</del>	Kanaka	LEHIGH ACRES, FL 33972
$\frac{N}{N}$ _ Add			
Kemove			
4)Change	D	PATSY WEDDING	2575 DeSOTO WAY SOUTH
X Add			ST, PETERSBURG, FL 33712
Remove			
	D	ALLEN SOLOMON	1210 - 7TH AVL. N.
5) Change Add			JACKSONVILLE BCHLFL 32250
Remove			
	D	LARRY BUTLER	P. O. BOX 25943
6) Change			SARASOTA, FL 34277
X Add			
Remove		Page 2 of d	

Page 2 of 4

(Attach additional sheets, if necessary)

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Example: X Change X Remove X Add	<u>y</u> <u>Mi</u>	m Doc ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
V	DMgr.	KATHERYN M. AUTON	P. O. BOX 1385
1) X Change			DADE CITY, FLORIDA 33526-11
Add			
_ Remove			
2) Change	D	MARGO BUZZARD	10930 \$.W. 47TH TERR.
A Add			MIAMI, PL 33165
Remove			3 SAWANNEE CIRCLE
3) Change	D	JOHN TINNEY	PANAMA CHY, FL 32405
X Add			PANASIA COLLIC 32 VV
Remove			
	D	WANDA ROTTLOFF	2527 - 66 FH TERR, SOUTH
4) Change			ST. PETERSBURG, FL 33712
X Add			
Remove			,
51 Change	D	CELESTE O'NEUL	8398 - 91ST TERRACE NORTH
X Add			SEMINOLE, FL 33777
<del></del> -			
Remove		A A DOWN THE POPPED	2009 CRAMPTON AVE.
δ) Change	D	KAREN SHAFFER	SARASOTA, FL 34235
N ——— Add			SARASOTA, CO STORE
Remove			

(Attach additional sheets, if necessary)

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Example: X Change X Remove X Add	<u>y</u> <u>M</u>	nn Doe ke Jones Ily <u>Smith</u>	
Type of Action (Check One)	Title	<u>N</u> ame	<u>Addres</u> s
	Ð	BUSTER LEON	1011 CORBY CT
Change X Add			TALLAHASSEE FL 32317X
Remove	D	LINDA NAVEĐO	GIO SHORT PINE CIRCLE
2) Change	<del></del>		ORLANDO, FL 32807
Remove  3 ) Change  X Add	<u>D</u>	VINCENT SICA	FT, LAUDERDALE, FL 33312
Remove 4) Change	<u>D</u>	GLENDA BECKETT	PALMETTO BAY, FL 33157
X Add	D	SHERYL LEWIS	808 S.W. 5TH CT.
5) Change Add			BOYNTON BEACH, Ft. 33426
Remove  6) Change	D	FRANK COLLINS	1820 BEDOVERE ST.
X Add			LAKELAND, PL 33813
Remove			

(Attach additional sheets, if necessary)

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Example: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		<u>Doe</u> <u>Iones</u> Smith	
Type <u>of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
	1)	THOMAS GARRETT	1980 HEATHER ST.
1) Change Add	<del></del>		MT, DORA, FL 32757
Remove			
	D	CECILIA BUTLER	P. O. BOX 25943
2) Change X Add	<del></del>		SARASOTA, FL. 34277
Remove			
3.1 Change			
Add			
Remove			
4) Change			
, Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary)	(Be specific)
(ante vi pintone and pintone pi	
N/A	
-	

Page 3 of 4

p.10

	JULY 24, 2018	, if other than the
The date of each amen tate this document was	dment(s) adoption:signed.	, ii oulet than the
	AUGUST 1, 2018	
Effective date <u>if applic</u>	able: (no more than 90 days after amendment file date)	
Note: If the date inserted document's effective da	ed in this block does not meet the applicable statutory filing requirements, thit te on the Department of State's records.	is date will not be listed as the
Adoption of Amendme	ent(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amen for approval.	ndment(s)
☐ There are no meml adopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) ward of directors.	as/were
Dated	JULY 24, 2018	
Signature	Katheryn M. auton	
C	(By the chairman or vice chairman of the board, president or other officer-if have not been selected, by an incorporator – if in the hands of a receiver, tru other court appointed tiduciary by that fiduciary)	directors ustee, or
	KATHERYN M. AUTON	
	(Typed or printed name of person signing)	<del></del>
	ASSOCIATION MANAGER/DIRECTOR	
	(Title of person signing)	<del></del>