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COVER LETTER

TO: Amendment Section Division of Corporations	·
NAME OF CORPORATION: NGOES PLSS	Club, Inc
DOCUMENT NUMBER: NO 7006607	
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	he following:
IRIS SHUR	
(Nan	ne of Contact Person)
Naples Press Club, In	i C
,	(Firm/ Company)
1022 Spanish Moss Tro	a;/
I	(Address)
Naplio, FL 34108 (City	
(City	/ State and Zip Code)
IRISJIM SHURE AOL	
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please call:	
IRIS SHUR	a, <u>239-593-9328</u>
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
(A	e to the Florida Department of State: 13.75 Filing Fee & S52.50 Filing Fee ertified Copy Additional copy is Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cu	rrently filed with tl	ie Florida Dept. o	f State)	
NAPLES PRESS CLU	RINC	N070	00001117	
	Sumber of Corporation			
ursuant to the provisions of section 617,1006, Florida St mendment(s) to its Articles of Incorporation:	tatutes, this Florida	Not For Profit Cor	<i>poration</i> adopts the	following
. If amending name, enter the new name of the corp	oration:			
PRESS CLUB 0 = SOUTHWE	EST FLORIDA	A, INC		_The new
name must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	poration" or "incor	porated" or the ab	breviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable:		<u>.</u>		
Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)			
				_
	-	<u></u> .		<u></u> .
Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		J- 4:		
			-	
). If amending the registered agent and/or registered	l office address in F	lorida, enter the r	name of the	
new registered agent and/or the new registered off		•		(*)
Name of New Registered Agent:				• 5
				. 5
		tFlorida street ac	ldress)	37
New Registered Office Address:				<u> </u>
			Florida	
	(City)		(Zip Code)	
sew Registered Agent's Signature, if changing Regist	tered Agent:			
hereby accept the appointment as registered agent. I a	un familiar with and	accept the obligat	ions of the position.	
	Signature of Nov	v Registered Agent	if changing	
	Signature of Nev	у кедіметен Адені	, ij enanging	

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.

Exampl <u>X</u> Cha <u>X</u> Ren <u>X</u> Ad	nge iove	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jos Sally Sn	<u>nes</u>		
Type of (Check	<u>'Action</u> One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1)	_ Change		_		_	
	_ Add				_	·
	_ Remove				-	
2)	_ Change		_		_	<u></u>
	_ Add				_	4
	_ Remove				_	
3)	_ Change		_		_	
	Add				_	
	Remove				_	
4)	_ Change		_		-	
	_ Add				_	
	_ Remove				-	
٦.	_ Change					
. /	Add				_	
	Remove				_	
	Nemove				-	
6)	_ Change		_		_	
	Add				_	
	Remove					

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Re specific)	(co) max.			
(anach additional sneets, if necessary).	(be specyte)				
					
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The date of each amendment(s) adoption: 17/19 date this document was signed.	, if other than the
Effective date if applicable: // / // / // // // // // // // // // /	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as the
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 ///6/19	
Signature Fit Flan	
(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)	
IRIS SHUR	
(Typed or printed name of person signing)	
Treasuren	
(Title of person signing)	