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JUN 23 2017 S. YOUNG

COVER LETTER

NAME OF CORPORATION: The Villages Vintage Can Club, INC. NO7000002284 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Para E Udell 1935 Winthrop The VILIGES FL 32162 (City/State and Zip/Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Paige Ude// at 406-250-2060
(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 & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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	α
The Villace	ESV: NTAG	ie Can (lub Inc
(Name of Corporation as curr		
N07	GGGGG 22	284
(Document Nu	mber of Corporation (if	known)
Oursuant to the provisions of section 617,1006. Florida Statemendment(s) to its Articles of Incorporation:	utes, this Florida Not F	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "corpo	reation " on "incorporate	The ne
"Company" or "Co." may not be used in the name.	ranon or meorphrane	ia or me universation Corp. or 1mc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)		
Trincipal office dualess MOST DE A STREET ADDRESS	<u>o</u>)	
	·	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		2.5
		<u></u>
). If amending the registered agent and/or registered o	ffice address in Florida	enter the name of the
new registered agent and/or the new registered office	e address:	The same of the
Name of Non Descriptional Court		
Name of New Registered Agent:		
	· · · · · ·	
New Registered Office Address:	(I	Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accep	t the obligations of the position.
	Signature of New Regis	stered 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:

 $P = President; V \cdot Vice President; T \cdot Treasurer; S = Secretary; D \cdot Director; TR - Trustee; C - Chairman or Clerk; CEO = Chief$ 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 De V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u></u>	Geana WERVE	1915 THNIEC Clipper Run The Villages FL 32102
2) Change Add	YP	Abram Scherbekow	1506 Doria Ln The Villages, FL 32159
Remove 3) Change Add	T	Paige Udell	1935 Winthrop The Villages, FL 32162
Remove 4) Change Add Remove			
5) Change Add			
6) Change Add			
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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The date of each amendment(s) add late this document was signed.	option: 05/15/2017	, if other than the
Effective date if applicable:	05/15/2017	·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s) l.	
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ers.	
Dated	06/17/2017	
Signature	06/17/2017 (Élik Care	
have not bee	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	ALAN CARET	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	