N07000004423

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	<u> </u>
(Ci	ty/State/Zip/Phon	e #)
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SECRETARY OF STATE
TALLAHASSEE, FLORID

Amenda

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Special Sunris	se Club) 		
DOCUMENT NUM	BER: N07000004423				
The enclosed Articles	of Amendment and fee are sub	omitted fo	r filing.		
Please return all corre	spondence concerning this mat	ter to the	following	g:	
		y Richm			<u>, , ,</u>
	(Name of	Contact l	Person)		
	Specia	I Sunrise	Club		···
	(Fim	n/ Compai	1у)		
	5401 NW	/ 102 Av	e.#137		
·	(,	Address)			
	Sunrise,	Florida	33351		
	(City/ Sta	te and Zip	Code)		
	bluechef3				
	E-mail address: (to be use	d for futu	re annual	report notifica	tion)
For further informatio	n concerning this matter, pleas	e call:			
Jeffrey Richmond		at (954		8
	of Contact Person)				ne Telephone Number)
Enclosed is a check for	or the following amount made p	payable to	the Flori	da Department	of State:
☑\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	fied Copy itional co		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. B	ng Address dment Section on of Corporations lox 6327		Amend Division Clifton	Address Iment Section on of Corporation Building	ns
Tallah	assee, FL 32314		2661 E	executive Center	Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

(Name of Corporation as cur	of Jun 1	150 OL the Florida Dept. of S	16 Inc	•
NOT	0000	20442	3	
(Document N	umber of Corporat	ion (if known)		
Pursuant to the provisions of section 617.100 he following amendment(s) to its Articles of		, this <i>Florida Not For</i>	Profit Corporation	adopts
A. If amending name, enter the new name	of the corporatio	<u>n:</u>		
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			ncorporated" or the	
B. Enter new principal office address, if a				
Principal office address <u>MUST BE A STRE</u>	<u>SET ADDKESS</u>)			T ZS
				L A
7 . P. 4	.1			JUL -1 AMII: 14
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)			<u> </u>	- SEE
				HE FEE
			•	ASSEE, FLURIOR
D. If amending the registered agent and/or new registered agent and/or the new re			nter the name of th	,
Name of New Registered Agent:				
New Registered Office Address:	(Flori	da street address)		
			, Florida	
		(City)	(Zip Code)	
lew Registered Agent's Signature, if change hereby accept the appointment as register			ept the obligations	of the
osition.	- '			•
_	Signature of New	Registered Agent, if ch	nanging	

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
DIR	Robert Hester	8760 Azalea Court #103 Tamarac, Florida 33321	
			Add Remove
	nding or adding additional Article additional sheets, if necessary). (
· · · · · · · · · · · · · · · · · · ·			<u></u>

The date of each amendmen	t(s) adoption: 6/21/2010
Effective date <u>if applicable</u> :	(date of adoption is required) Immediately upon filing
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary) Jeffrey Richmond (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Director
	(Title of person signing)