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Anord N.C.

COULLIETTE

FEB 1 2 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>DESTIN CL</u>	UB,NORHT FLORIDA REG	ION,PORSCHE CLUB
DOCUMENT NUMBER: N0800000740		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the	nis matter to the following:	
RUSSELL D ALDRICH		
(Name	e of Contact Person)	
(F	irm/ Company)	
P.O. BOX 5281		
·	(Address)	
DESTIN FL 32540		
(City/ For further information concerning this matter	State and Zip Code) r, please call:	
RUSSELL ALDRICH (Name of Contact Person)	at (850) 862-36	28 Telephone Number)
Enclosed is a check for the following amount	` .	• •
\$35 Filing Fee \$ Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

DESTIN CLUB, NORTH FLORIDA REGION, PORSCHE CLUB OF AME (Name of Corporation as currently filed with the Florida Dept. of State)

N0800	0000740	
Pursuant to the provisions of section 617.1006, Florida he following amendment(s) to its Articles of Incorporation	Statutes, this Florida Not For	r Profit Corporation adopts
A. If amending name, enter the new name of the cor	poration:	
DESTIN CAR CLUB INC.		_
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co."		
B. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADD</u>		

		\
C. Enter new mailing address, if applicable:		09 F
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	g <u>N/A</u>	\$\frac{\pi}{\pi} \frac{\pi}{\pi} \frac{\pi}{\pi} \frac{\pi}{\pi}
		SSE SSE
	•	<u> </u>
	•	[S] is D
 If amending the registered agent and/or registered new registered agent and/or the new registered o 		enter the marke of the
	,	1
Name of New Registered Agent: N/A		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis		
hereby accept the appointment as registered agent. position.	I am familiar with and ac	ccept the obligations of the
11(
Signature	e of New Registered Agent, if	changing

Page 1 of 3

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)

Address **Type of Action** Title **Name** ALDRICH, RUSSELL D **PRES** 638 WEST SUNSET BLVD Add FORT WALTON BEACH, Fix 2 Remove ROBERTS, SCOTT 814 N.LAKESIDE DRIVE . 4 Add PRESI _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 2/05/2009		
Effective date <u>if applicable</u> :	2/05/2009	
	(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	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
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.	
Dated 2/09	5/2009	
Signature		
(B)	the chairman of vice chairman of the board, president or other officer-if directors	
	ve not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	RUSSELL D ALDRICH	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	

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