

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000249292 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFF

Account Number: I19990000006 : (407)425-7010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Sbaker@zkslawfirm.

COR AMND/RESTATE/CORRECT OR O/D RESIGN CAMP MACK'S MASTER ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count 05	
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations CAMP MACK'S MASTER ASSOCIATION, INC. NAME OF CORPORATION: N08000007215 DOCUMENT NUMBER: The onclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: D. SCOTT BAKER, ESQUIRE (Name of Contact Person) ZIMMERMAN KISER SUTCLIFFE, P.A. (Firm/ Company) 315 E. ROBINSON STREET, SUITE 600 (Address) ORLANDO, FLORIDA 32801 (City/ State and Zip Code) SBAKER@ZKSLAWFIRM.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 425-7010 D. SCOTT BAKER, ESQUIRE 407 (Daytime Telephone Number) (Name of Contact Person) (Area Code) 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
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

NO. 2087 3 H150002F02923

Articles of Amendment to Articles of Incorporation of

CAMP MACK'S MASTER ASSOCIATION, INC	C.		
(Name of Corporation	as currently filed with th	e Florida Dept, of Sta	ite) 34
N08000007215			
(Docum	ment Number of Corporation	n (If known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida !</i>	Not For Profit Corpord	ntton adopts the following
A. If amending name, enter the new name of the	e corporation:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		porated" or the abbrev	The new lation "Corp." or "Inc."
B. <u>Enter new principa l'office address, il applica</u> Principal office address <u>MUST BE A STREET A</u>	able: IDDRESS)		
C. Euter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>) · · ·		
 If amending the registered agent and/or registered agent and/or the new registered. 		orida, enter the name	of the
Name of New Registered Agent:	D. SCOTT BAKER, ESC	UIRE - ZIMMERMA	n kiser sutcliffe
	315 E. ROBINSON STRI	SET, SUITE 600	
New Registered Office Address:		(Florida su ees address)
	ORLANDÔ	•	Florida 32801
	(Clty)	٨ و	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		accept the obligations (of the position.
_	D.5ct	Bok	
	Signature of New	Registered Agent, If ch	anging

Page 1 of 4

H15000249292 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)

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

Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	Title	Name	Address
l)Change	SVD	ROBERT E. EDDY	14900 CAMP MACK ROAD
Add X Remove	 -	,	LAKE WALES, FL 33898
2) Change	Д	DEBBIE FARRIS	14900 CAMP MACK ROAD
Add X Remove			LAKE WALES, PL 33898
3)Change	PTD	BILLIE W, PARRIS	14900 CAMP MACK ROAD
Add X Remove			LAKE WALES, FL 33898
4) Change	PS	MICHAEL DAUGHERTY	14900 CAMP MACK ROAD
X Add			LAKE WALES, FL 33898
5)Change	VT	LEAH MILLER	14900 CAMP MACK ROAD
X Add Remove			LAKÉ WALES, FL 33898
δ) Change	D	DOYLE MILLER	14900 CAMP MACK ROAD
X Add			LAKE WALES, FL 33898
Remove		Page 2 of 4	

H15000249292 3

		icles, enter change(s) here: (Be specific)			
	<u> </u>				
_					
_			·		
—				 -	
			·		
		"			
_					
			·		
_					
				_	

Page 3 of 4

H150002492923

The date	date of each amer this document was	OCTOBER 8, 2015 idment(s) adoption: if other then t
Effe	ective date <u>if apoli</u>	mble:
		(no more than 90 days after amendment file date)
Note	er. If the date insert ument's effective de	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the te on the Department of State's records.
Ađo	mbasatA to acity	cup(2) (CHECK ONE)
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.
Ü	There are no memi adopted by the bo	bers or mambers entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
	Dated	10/16/2015 Frak Miller
	Signature	
		(By the obstructs or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator—if in the bands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
		LEAH MILLER
		(Typed or printed name of person signing)
•		VICE PRESIDENT
		(Title of person signing)