

(Re	questor's Name)	,		
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		,		
		,		
		•		

Office Use Only



700287674197

07/08/16--01005--012 \*\*35.00

MC

JUL 12 2016

R. WHITE

16 JUL -8 PM 3: 06

## **COVER LETTER**

Ý

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	Revenue Club, Inc.			
DOCUMENT NUMBER:	N08000007382			
The enclosed Articles of Ai	mendment and fee are subm	itted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
Frank Diaz				
	(	Name of Contact Pe	erson)	
Revenue Club, Inc.		er ge <sup>gj</sup>		·
	•	(Firm/ Company	·)	
14000 Lake Candlewood C	Ct .			
		(Address)		
Miami Lakes, FL 33014				
	(1	City/ State and Zip (	Code)	
frank@adgomni.com				
	E-mail address: (to be used f	or future annual rep	ort notification	)
For further information con	cerning this matter, please co	all:		
Frank Diaz		at	305	903-7020
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pays	able to the Florida D	Department of S	tate:
\$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	1\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifie Certifie	Filing Fee cate of Status ed Copy ional Copy is sed)

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

FILED

## Articles of Amendment

• 3

Articles of American

16 JUL -8 PH 3:06

SECRETARY OF SEMANTALLARDS OF FLORES

Revenue Club, Inc.	
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
N08000007382	en tra
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
. If amending name, enter the new name of the corpo	oration:
Stay in FLA, Inc.	The new
name must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	14000 Lake Candlewood Ct
Principal office address <u>MUST BE A STREET ADDRE</u>	ESS) Miami Lakes, FL 33014
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 248217
	Coral Gables, FL 33124-8217
If amending the registered agent and/or registered and/or registered agent and/or the new registered officered.	office address in Florida, enter the name of the ice address:
Name of New Registered Agent:	
N/A	
New Registered Office Address:	(Florida street address)
N/A	, Florida N/A
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an	ered Agent: m familiar with and accept the obligations of the position.
<del></del> -	Signature of New Registered Agent, if changing

Page 1. of 41 - 12 to the last of the last

10 873

Wall to protect the

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	ange <u>PT John Doe</u> move <u>V Mike Jones</u>			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	N/A	N/A	N/A	
Add	•			
Remove		• • • • • • • • • • • • • • • • • • • •		
2) Change	N/A	N/A	N/A	
Add			<del></del>	
Remove			<del> </del>	
3) Change	N/A	N/A	N/A	
Add		•	<del></del>	
Remove			·	
4) Change	N/A	N/A , ,	N/A	
Add				
Remove				
5) Change	· N/A	N/A	N/A	
Add		<b>.</b>		
Remove				
6) Change	N/A	N/A	N/A	
Add				
Remove	•			

E. If amending or adding additional Art	icles, enter change(s) here:	Barrier State	Sugar Sugar
(attach additional sheets, if necessary).	(Be specific)	Define the second of	Show Broom See 18
Ņ/A			·
			·
		7 % 1/4 %	
		<del></del>	
			·
		·	·
`			·
·			
			·
			<del></del> _

	date of each amenda this document was si		0//01/2016	, if other than the
Eff	ective date <u>if applical</u>	07/01/201 ble:		
			(no more than 90 days after amendment file date)	
	e: If the date inserted ument's effective date		es not meet the applicable statutory filing requirements, this ent of State's records.	s date will not be listed as the
Add	ption of Amendmen	t(s)	(CHECK ONE)	
	The amendment(s) w was/were sufficient f	•	by the members and the number of votes cast for the amen	ndment(s)
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 _	7/03/2016		
	Signature_	٠	Jack ()	
	hi	ave not been sel	or vice chairman of the board, president or other efficer-if depted, by an incorporator—if in the hands of a receiver, trust tiduciary by that fiduciary)	
		Frank Diaz	•	
			(Typed or printed name of person signing)	
		Director		
			(Title of person signing)	