## N0900000122

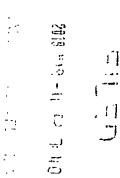
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January 25, 2019

SUSAN A MELVIN 8801 HAMPSHIRE DR SEBRING, FL 33876

SUBJECT: THE ROTARY CLUB OF HIGHLANDS COUNTY INC

Ref. Number: N0900000122

We have received your document for THE ROTARY CLUB OF HIGHLANDS, COUNTY INC and your check(s) totaling \$35.00. However, the enclosed; document has not been filed and is being returned for the following correction(s):...

Please revise page 2 of 4.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 919A00001855

RECEIVED MAR 0 4 2019

## **COVER LETTER**

TO: Amendment Section

Division of Corporations The Rotary Club of Highlands County Inc NAME OF CORPORATION: N09000000122 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Susan A Melvin (Name of Contact Person) The Rotary Club of Highlands County Inc (Firm/ Company) 8801 Hampshire Dr (Address) Sebring, FL 33876 (City/ State and Zip Code) susan@hpsebring.com E-mail address: (to be used for future annual report notification) اب For further information concerning this matter, please call: 10 Susan A Melvin 863 449-0927 (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 Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

The Rotary Club of Highlands County Inc

| (Name of Corporation   | n as currently    | filed with the Flo               | rida Dept. of State)     |                       |               |
|--|-------------------|----------------------------------|--------------------------|-----------------------|---------------|
| N09000000122   |                   |                                  |                          |                       |               |
| (Docu  | ment Number c     | of Corporation (if I             | (nown)                   |                       | <del></del> - |
| Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:          | orida Statutes, t | his <i>Flo<b>rida Not F</b>o</i> | or Profit Corporation    | adopts the fe         | ollowing      |
| A. If amending name, enter the new name of th  | e corporation:    | <u> </u>                         |                          |                       |               |
|  |                   | ,                                |                          |                       | The new       |
| name must be distinguishable and contain the wor<br>"Company" or "Co." may not be used in the nam          |                   | " or "incorporate                | d" or the abbreviation   | п "Corp." ог          | "Inc."        |
|  |                   |                                  |                          |                       |               |
| B. Enter new principal office address, if application of the application of the address MUST BE A STREET A |                   |                                  |                          |                       | <del></del>   |
| ·  |                   |                                  |                          |                       |               |
|  | _                 |                                  |                          |                       |               |
| C. Enter new mailing address, if applicable:   |                   |                                  |                          |                       |               |
| (Mailing address MAY BE A POST OFFICE  | BOX)              |                                  |                          |                       |               |
|  |                   |                                  |                          |                       |               |
|  |                   |                                  |                          | -                     | 15            |
|  |                   |                                  |                          | ,                     |               |
| ). If amending the registered agent and/or reg   |                   |                                  | , enter the name of tl   | <u>he</u>             | 9<br>1        |
| new registered agent and/or the new registe  |                   | ress:                            |                          |                       | Ξ.            |
| Name of New Registered Agent:  | Lois Brown        |                                  |                          |                       | - TC          |
|  | 1806              | DeLeon                           | Place                    | ٠.                    | لبب<br>سع     |
| Mars Basistanad Office Address   |                   | (I·                              | lorida strect address)   | 1.                    | <del></del>   |
| <u>New Registered Office Address</u>   | :<br>Output:      | 0.4                              |                          | <b>-</b>              | 20            |
|  | Sebrii            | 19                               | , Florid                 | la <u>35</u><br>Code) | 8 10          |
|  | (                 | Cuy)                             | (2.17.                   | Coae)                 |               |
| New Registered Agent's Signature, if changing hereby accept the appointment as registered age              |                   |                                  | t the obligations of the | position.             |               |
| _  | Laco              | Brown                            | un                       |                       |               |
|  | Signo             | iture of New Regis               | tered Agent, if changi   | ng                    |               |

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 | $\overline{\underline{V}}$ $\overline{\underline{Mi}}$ | nn Doe<br>ke Jones<br>lly Smith |                                       |
|-----------------------------------|--|---------------------------------|---------------------------------------|
| Type of Action<br>(Check One)     | <u>Title</u>   | <u>Name</u>                     | <u>Addres</u> s                       |
| 1) Change                         | т  | Lois Brown                      | 1806 De Leon Place                    |
| Add                               |  |                                 | Sebring, FL 33870                     |
| Remove                            |  |                                 |                                       |
| 2) Change                         | +  | Barbara Taylor                  | 814 Sportsman Ave<br>Sebring 18233875 |
| Add                               |  |                                 | Sebring, FZ 3:3875                    |
| X Remove                          |  |                                 |                                       |
| 3) Change                         |  |                                 |                                       |
| Add                               |  |                                 |                                       |
| Remove                            |  |                                 | : i)                                  |
| 4) Change                         |  | <del></del>                     | i i i i i i i i i i i i i i i i i i i |
| Add                               |  |                                 |                                       |
| Remove                            |  |                                 | - <del> </del>                        |
| 5) Change                         |  |                                 |                                       |
| Add                               |  |                                 |                                       |
| Remove                            |  |                                 | · · · · · · · · · · · · · · · · · · · |
| 6) Change                         |  |                                 |                                       |
| Add                               |  |                                 |                                       |
| Remove                            |  |                                 |                                       |

| If amending or adding additional Arti<br>(attach additional sheets, if necessary). | (Be specific) |              |              |
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|            | e date of each amendment(s) ado<br>e this document was signed.            | ption:  |                        | , if other than the |
|------------|---|---|------------------------|---------------------|
|            | ū   |   |                        |                     |
| Eff        | ective date <u>if applicable</u> :  | (no more than 90 days after amendment file  | date)                  |                     |
| Not<br>loc | te: If the date inserted in this block ument's effective date on the Depa | .  does not meet the applicable statutory filing requ   |                        | t be listed as the  |
| Ade        | option of Amendment(s)  | ( <u>CHECK ONE</u> )  |                        |                     |
|            | The amendment(s) was/were ado was/were sufficient for approval.           | pted by the members and the number of votes east  | t for the amendment(s) |                     |
|            | There are no members or member adopted by the board of directors          | rs entitled to vote on the amendment(s). The ame s.   | endment(s) was/were    |                     |
|            | Dated 11/21/2018  | In Mus  |                        |                     |
|            | have not been   | an or vice chairman of the board, president or oth selected, by an incorporator – if in the hands of a pointed fiduciary by that fiduciary) |                        |                     |
|            | Susan A M   | lelvin  |                        |                     |
|            |   | (Typed or printed name of person sig  | gning)                 |                     |
|            | Secretary   |   | 211                    |                     |
|            | <del></del>   | (Title of person signing)   |                        | 11                  |
|            |   |   | ਸ<br>14 ਨੂੰ            | j                   |
|            |   |   | 참 O<br>: 변<br>파        |                     |