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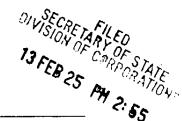
T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

•		
NAME OF CORPORATION: DOMINIC	CA SOCIAL (CLUB, INC
DOCUMENT NUMBER: N0900010)768	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Gabriel LeBlanc		
	(Name of Contact Person)
Dominica Social Club, Ir	nc.	
	(Firm/ Company)	
660 SE Stow Terrace		·
	(Address)	
Port St. Lucie, FL 34984	-6423	
	(City/ State and Zip Code)
sisserrou8@aol.d		
E-mail address: (to be use	d for future annual report n	otification)
For further information concerning this matter, please	e call:	
Gabriel LeBlanc	772	343-8622 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depai	rtment of State:
□ \$35 Filing Fee	□\$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	Division Clifton 2661 Ex	Address nent Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



Dominica Social Club, Ir	nc.			174 Z.
(Name of Corporation as current	ly filed with the Fl	orida Dept. of State)		
NO9000010768				
(Documer	t Number of Corpo	ration (if known)		
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate		tes, this <i>Florida Not Fo</i>	or Profit Corporation adop	ts the following
A. If amending name, enter the new na	me of the corpora	tion:		
Dominica-America Schol	arship and (Culture, Inc.		The new
name must be distinguishable and contain "Company" or "Co." may not be used in		ation" or "incorporate	d" or the abbreviation "Co	orp." or "Inc."
B. Enter new principal office address,	if annlicable:			
(Principal office address MUST BE A S		N/A		
C. Enter new mailing address, if appli		N/A		
(Mailing address MAY BE A POST)	OFFICE BOX)			
				<u>-</u>
				
D. If amending the registered agent an	d/or registered off	ice address in Florida	, enter the name of the	
new registered agent and/or the nev				
Name of New Registered Agent:	N/A			
V D		(Florida street address)		
New Registered Office Address:	N/A			
			, Florida (Zip Code)	·
	(City)	,	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			t the obligations of the nos	ition
i nereoy accept the appointment as regist	ereu ugem r um jo	иттаг жин ана ассер	i ine obligations of the posi	HOH.

Page 1 of 4

Signature of New Registered Agent, if changing

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) N/A Change		N/A		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add		-		
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
(anden duditional sheets, if necessary).	(De specific)					
N/A						
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The	The date of each amendment(s) adoption: January 19, 2013				
Effe	ective date if applicable:				
	(no more than 90 days after amendment file date)				
Ado	option of Amendment(s) (CHECK ONE)				
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.				
	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 February 18, 2013 Signature				
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	Gabriel LeBlanc				
	(Typed or printed name of person signing)				
	Registered Agent - Director				
	(Title of person signing)				