

NO9000011733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

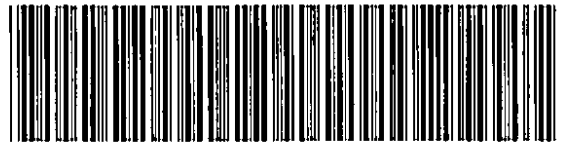
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200316035492

07/23/18--01030--003 **25.00

09/06/18-01002--002 **10.00

FILED
2018 SEP -4 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FL

Amend.
9-5-18
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2018

LEAH HEMINGWAY
COOPER CITY COWBOYS LACROSSE CLUB INC.
10517 SW 49TH PLACE
COOPER CITY, FL 33328

SUBJECT: COOPER CITY COWBOYS LACROSSE CLUB INC.
Ref. Number: N09000011733

We have received your document for COOPER CITY COWBOYS LACROSSE CLUB INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 018A00015809

RECEIVED
18 SEP -4 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 28, 2018

Attention: Florida Department of State Division of Corporations

Cooper City Cowboy Lacrosse Club Inc.

Ref Number: N09000011733

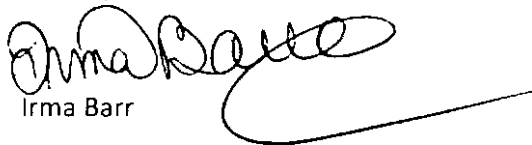
To Whom It May Concern:

Please find enclosed the corrected forms per your attached letter reference number: 018A00015809.

Enclosed you will also find a money order for the \$10.00 additional filing fee.

If you have any questions please feel free to contact me at 954-494-4577.

Thank you,


Irma Barr

CCHS Lacrosse Booster Club outgoing President

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cooper City Cowboys Lacrosse Club Inc
DOCUMENT NUMBER: N09000011733

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leah Hemingway
(Name of Contact Person)
Cooper City Cowboys Lacrosse Club Inc.
(Firm/ Company)
10517 SW 49th Place
(Address)
Cooper City FL 33328
(City/ State and Zip Code)
leahhemingway@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Randi Meshel at 954-445-0600
(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Cooper City Cowboys Lacrosse Club, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO9000011733

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Leah Hemingway
10517 SW 49 Place
Cooper City FL 33328

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Randi Meshel
P.O. Box 814722
Hollywood, FL 33081

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Leah Hemingway
10517 SW 49 Place
(Florida street address)

New Registered Office Address: Cooper City, Florida 33328
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Leah

Signature of New Registered Agent, if changing

2018 SEP -4 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|----------|--------------------------|--|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>P</u> | <u>Irma Barr</u> | <u>10408 SW 49 Place</u>
<u>Cooper City FL</u>
<u>33328</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Dominick Dattilio</u> | <u>11201 Reveille Rd.</u>
<u>Cooper City FL</u>
<u>33328</u> |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Debra Drew</u> | <u>3908 Limestone Dr.</u>
<u>Cooper City FL</u>
<u>33026</u> |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>S</u> | <u>Leah Hemingway</u> | <u>10517 SW 49 Place</u>
<u>Cooper City FL</u>
<u>33328</u> |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>T</u> | <u>Hiedi Krause</u> | <u>4998 SW 120 Ave.</u>
<u>Cooper City FL</u>
<u>33330</u> |
| 6) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>P</u> | <u>Randi Meshel</u> | <u>PO Box 814722</u>
<u>Hollywood FL</u>
<u>33081</u> |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

7) Add V Nicole Blocker 12006 Landing Way
Cooper City FL
33026

8) Add V Debra Drew 3908 Limestone Dr
Cooper City FL
33026

9) Add T Leah Hemingway 10517 SW 49 Plac
Cooper City FL
33328

10) Add S Jay Silver 10410 SW 56 St
Cooper City FL
33328

The date of each amendment(s) adoption: April 23rd, 2018, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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 8-28-18

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)

Leah Hemingway
(Typed or printed name of person signing)

Treasurer
(Title of person signing)