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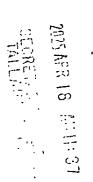
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

LEHIGH CAVA NAME OF CORPORATION:	ALIERS DOMINO CLU	B, INC.			_
DOCUMENT NUMBER:			<u> </u>		_
The enclosed Articles of Amendment and fee are	submitted for filing,				
Please return all correspondence concerning this r	natter to the following:				
Stephen N. McGuire II, Esq.					
	(Name of Contact l	Person)	<u> </u>	_	_
McGuire Law & Title, P.A.					
	(Firm/ Compa	ny)			_
PO Box 60205				~ 검	
	(Address)		-	13 Sh 27 B	<u> </u>
Fort Myers, FL 33906					ć -
	(City/ State and Zip	Code)		<del></del>	جر حد:
entities@cmw.law				***	_
E-mail address: (to be t		eport notificatio	11)		(, -
For further information concerning this matter, plo	rase call:				
Stephen N. McGuire II. Esq.		239 t	939-2222		
(Name of Contact Per	rson)	(Area Code)	(Daytime Telep	hone Number)	
Enclosed is a check for the following amount mad	le payable to the Florida	Department of	State:		
■ \$35 Filing Fee □\$43,75 Filing Fee Certificate of Stati		Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Sectivision of Corp he Centre of T	orations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	Dept. of State	<u>;</u> )		
N10000000088				
(Document Num	ber of Corpora	tion (if known)		
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florid</i>	la Not For Profit Co	orporation adopts the fo	ollowin
A. If amending name, enter the new name of the corpora	ition:			
LEHIGH CAVALIERS DOMINO AND COMMUNITY CI	JUB, INC.		•	The new
name must be distinguishable and contain the word "corpord" Company or "Co." may not be used in the name.	ation" or "inco	orporated" or the ai		
B. Enter new principal office address, if applicable:	1320 Busine	ass Way		~;
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Lehigh Acre	es, FL 33936	22	7825 ALS
			- 111 	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 150	)6	ingi 	- - - -
	Lehigh Acre	s, FL 33970		
<u>Name of New Registered Agent</u> :	address: te Legal Solutio	ons	name of the	
5072 An	nunciation Cir.			
New Registered Office Address:		(Florida street a	ddress)	
Ave Mar	ria		, Florida 34142	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	d Agent: umiliar with ph	is accept the officer	tions of the position.	

Signate 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	PT         John De           V         Mike Je           SV         Sally St	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>D. P</u>	Elsa Thompson	717 Fargo Dr Fort Myers, FL 33913
Remove			
2) <u>×</u> Change Add	D. VP	Ivan Mullings	1272 Sussex St Fort Myers, FL 33913
Remove 3 ) Change     Add     Remove	<u>D, T</u>	Jennifer Mazon	1316 Washington Ave Lehigh Acres, FL 33972
4) × Change Add	D. Finar	Artnel Gordon	806 Euclid Ave Lehigh Acres, FL 33936
Remove  5) Change  Add  Remove	Recordii	Beverly Bell	420 Jefferson Ave Lehigh Acres, FL 33936
6) Change Add	Public R	Angel, Vernon	
× Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
		umble is changed as follows: the remainder	
The Corporation is exc	clusively organized	d, and shall be operated exclusively for, the fo	ollowing pleasurable, recreational,
and other similar non-pro	titable purposes no	ormally undertaked by a social and communi	ty club:

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 = Trustec; 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.

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Example: XChange X Remove X Add	PT         John De           V         Mike Jo           SV         Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
T) Change Add	Recordii	Henry Loraine	
x Remove			
2) Change Add	<u>Presider</u>	Cummings, Clive	
* Remove 3) Change Add Remove	Treasure	Cummins. Bernadette	
4) Change Add	Manage.	Slater, Paul	
Nemove		_	
5) Change Add	Assistan	Coleman, Carl	
× Remove			
6) Change Add	<u>Captai</u>	Small, Julius	
. Remove			
		cles, enter change(s) here: (Be specific)	

The date of each amendment(s) adoption:date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment	u jile date)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory tilin document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the

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.

Dated	4/10/2025
	GI FI
Signati	(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)
	Elsa Thompson
	Elsa Thompson (Typed or printed name of person signing)