## 110000001134

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	tdress)	
(Cil	ty/State/Zip/Phone	e #)
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Amendicus (105/19/11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fraternal Orde	er of Irish American Soc	cial Club of Flagler
DOCUMENT NUM	BER: N10000001134		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		aid L Jaffe	
	(Name of	Contact Person)	
	(Firm	n/ Company)	
	101 Br	rewster Lane	
	(1	Address)	
	- · · · · · · · · · · · · · · · · · · ·	st, Florida 32137	
	(City/ Sta	te and Zip Code)	
		499@cfl.rr.com d for future annual report notifications	ation)
For further information	on concerning this matter, please	e call:	
Ronald L Jaffe		at ( 386 ) 569-724	3
(Name	of Contact Person)	(Area Code & Daytir	ne Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the Florida Department	t of State:
\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. B	ng Address dment Section on of Corporations lox 6327 assee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	· Circle

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

N10000001134 N10000001134 (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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Christine A Jaffe Name of New Registered Agent: 30 Fernham Lane (Florida street address) New Registered Office Address: Palm Coast \_\_\_\_, Florida <mark>32137</mark> (Zip Code) (City) 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.

Page 1 of 3

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>s</u>	Lance W Jaffe	23 Sea Shark Path Palm Coast, Florida 32164	□ Add ☑ Remove
<u>s</u>	Bradly J Tyner	1655 San Vincente Ave Napa, CA 94558	
E. If amend	ding or adding additional Article dditional sheets, if necessary). (	es, enter change(s) here:  Be specific)	
	aumonal sheets, if necessary,	be specifie)	
			<del> </del>
			<del></del>
<u>.</u>			

The date of each amendmen	t(s) adoption: 05/03/2011
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/wee was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_05/0	04/2011
Signature	Christine A. Jalke
(By hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Christine A Jaffe
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3