

N11000005677

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TOLSON, FLORIDA

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11/7/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MONARCH LACROSSE, INC.

DOCUMENT NUMBER: N11000005677

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

Please return all correspondence concerning this matter to the following:

JASON BENNETT ALFORD

(Name of Contact Person)

MONARCH LACROSSE, INC.

(Firm/ Company)

2543 DAUPHINE CT E

(Address)

PONTE VEDRA BEACH, FL 32082

(City/ State and Zip Code)

jalford@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JASON ALFORD

(Name of Contact Person)

at (443) 752-3710

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2013

JASON BENNETT ALFORD
2543 DAUPHINE CT E
PONTE VEDRA BEACH, FL 32082

SUBJECT: MONARCH LACROSSE INC.
Ref. Number: N11000005677

We have received your document for MONARCH LACROSSE 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 113A00024290

Articles of Amendment
to
Articles of Incorporation
of

MONARCH LACROSSE, INC.

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

N11000005677

(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)

2543 DAUPHINE CT E
PONTE VEDRA BEACH, FL 32082

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2543 DAUPHINE CT E
PONTE VEDRA BEACH, FL 32082

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:

JASON B. ALFORD

2543 DAUPHINE CT E

(Florida street address)

New Registered Office Address:

PONTE VEDRA BEACH

(City)

Florida

32082

(Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

J B Alford
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:

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

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>ROB JENMS</u>	<u></u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>JASON ALFORD</u>	<u>2543 DANPINE CT E</u> <u>PUNTE VEDRA BEACH, FL 32082</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>

(attach additional sheets, if necessary). (Be specific)

(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 10/1/2013, if other than the date this document was signed.

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

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

10/24/2013

Signature

J. B. Alford
(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)

JASON B. ALFORD
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)