

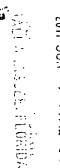
(Re	equestor's Name)	· -
(Ac	ldress)	·
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	

Office Use Only

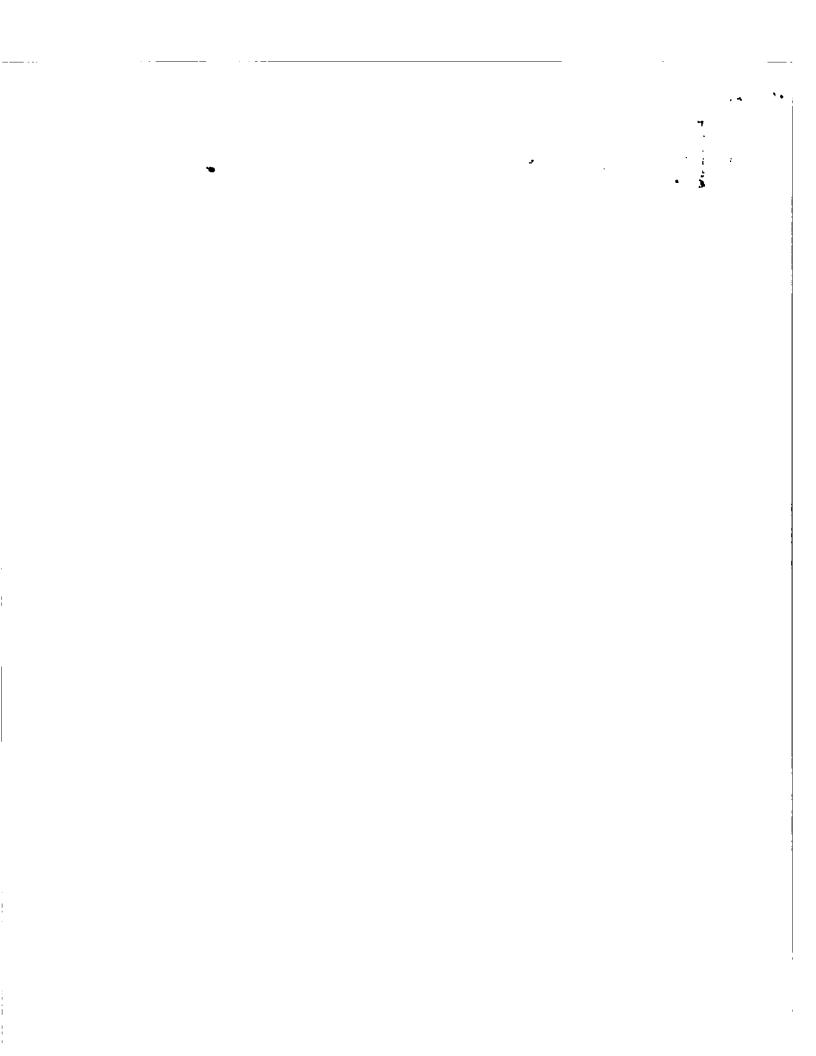


100299972351

ũ6/07/17--01020--029 *•35.00



C. GOLDEN JUN - 9 2017



COVER LETTER

TO: Amendment Section Division of Corporations

INTREPID BROTHERS MOTORCYCLE CLUB, INC. NAME OF CORPORATION:
N1100008602
OOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BURROWS, DANIEL
(Name of Contact Person)
INTREPID BROTHERS MC
(Firm/ Company)
PO BOX 1016
(Address)
ALACHUA FL 32616
(City/ State and Zip Code)
JOKER@INTREPIDBROTHERSMC.COM
E-mail address: (to be used for future annual report notification)
for further information concerning this matter, please call:
BURROWS, DANIEL 352 2848473 at
(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:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status (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

FILED

. А	articles of incorporation	
INTREPID BROTHERS MOTORCYCLE CLUB, IN	of C.	2017 JUN - 7 PM (2: 35
(Name of Corporation as o	currently filed with the Flo	rida Dept. of State)
N11000008602		ALLAMAJSEC, FLORIDA
(Document	Number of Corporation (if k	·
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The nev
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET AD</u> DI		
		
2. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
D. If amending the registered agent and/or registere		, enter the name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent:		
		lorida street address)
New Registered Office Address:	·	· · · · · · · · · · · · · · · · · · ·
		, Florida
	(City)	(Zip Code)
	•	•
lew Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept	the abligations of the position
The state of the spyrimine in the registered agent. The	от запача в поста иссерь	the congutaris of the position.
	Signature of New Regis.	tered Avent if changing
		COLONIA COLONIA SERVICIO DE CO

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>V</u> <u>M</u>	<u>hn Doe</u> ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>VP</u>	MANSOLO, DANNY	PO BOX 1016
Add			ALACHUA FL 32616
Remove			
2) X Change	TR	CALIGIURI, NICCOLO	PO BOX 1016
Add			ALACHUA FL 32616
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove	•		
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)
<u> </u>	
-	
	
-	
-	
	
	<u> </u>
	
 _ 	
	<u> </u>

	5/19/2017	
The date of each amend	lment(s) adoption:	, if other than the
date this document was s	igned.	
	5/19/2017	
Effective date if applica	<u>ble</u> :	
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will no e on the Department of State's records.	t be listed as the
Adoption of Amendmen	nt(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
☐ There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated	5/24/2017	
Signature _	1 Jan - Marine	
ŀ	By the Chairman of 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)	
	MANSOLO, DANNY	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	