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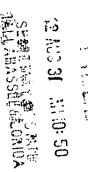
(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
. (Ad	ldress)	
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SEP -4 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Craft Club	o of Sebastian, Inc.
DOCUMENT NUMBER: N1200000	123
The enclosed Articles of Amendment and fee are subr	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Karen Lampiasi	
•	(Name of Contact Person)
Craft Club of Sebastian,	Inc.
	(Firm/ Company)
942 Fulton Way	
	(Address)
Sebastian, FL 32958	
	(City/ State and Zip Code)
KarLamp.1@juno	
For further information concerning this matter, please	for future annual report notification)
Karen Lampiasi	at (772) 388-5244 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$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



	O1	•	****```\$\$###
Craft Club of Sebastian, Inc.			. to 18
(Name of Corporation as currently filed	l with the Florida Dept. of	'State)	
N1200000123			
(Document Num	ber of Corporation (if know	n)	
Pursuant to the provisions of section 617.1006, I amendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida</i>	a Not For Profit Corporation adop	ts the following
A. If amending name, enter the new name of	the corporation:		
			The ne
name must be distinguishable and contain the w "Company" or "Co." may not be used in the n		orporated" or the abbreviation "Co	orp." or "Inc.
•			
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>			
1 incipal office address MOST BLASTREE			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
, <u>8</u>			
	<u></u>		
D. If amending the registered agent and/or re	egistered office address in	Florida, enter the name of the	
new registered agent and/or the new regis			
Name of New Registered Agent:			
	(Florida street ac	idress)	
New Registered Office Address:			
	···	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin			
hereby accept the appointment as registered as	zent. I am familiar with an	d accept the obligations of the pos	ition.

Page 1 of 4

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: X Change	<u>PT</u> .	John Doe	
X Remove	<u>v</u> 1	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	Sec	Betty Dolan	745-204 3rd Circle Vero Beach, FL 32962
2) Change Add Remove	Secretary	Carol Wilson	932 Rose Arbor Dr Sebastian, FL 32958
3) Change Add x Remove	Trea	Debra Maerz	13275 N Indian River Dr Sebastian, FL 32958
4) Change Add Remove	Treasurer	Connie Piper	2112 Spring Creek Circle Palm Bay, FL 32905
5) Change Add Remove			
6) Change Add Remove			

L. If amending or adding additiona (attach additional sheets, if necessor	ary). (Be specifi	c)		
				· -
	- -			
				_
		·		
	-		•	
		·	-	

The date of each amendment(s) adoption: 8-22-12
Effective date if applicable: September 1, 2012
(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 August 22, 2012
Signature Selen Tampiasi
(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)
Karen Lampiasi
(Typed or printed name of person signing)
President
(Title of person signing)