N1200000 5745

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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: The Historic Camelliarties Club of Gainesville, In DOCUMENT NUMBER: _N /2000005745 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michelle Grant-Akins
(Name of Contact Person) The Hostoric Camelliattes Club of (Address) Jains SVILL, FL 32614 - 2183 (City/ State and Zip Code) Consultant. Com
E-mail address: (to be used for future annual report notification) · For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of 67 11 12 57
the Historic Camelliaettes Club of Gaines Ville Line (Name of Corporation as currently filed with the Florida Dept. of State) P 2 38 1/ 12000005745
(Name of Corporation as currently filed with the Florida Dept. of State) 2 38
N 12000005745
(Document Number of Corporation (if known) TARLANASSEE: FAURIER
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) 1215 SE 1241 Terrace
(Principal office address MUST BE A STREET ADDRESS) 1215 SE 1244 Terrice
gaines ville, 12 32641
(Mailing address MAY BE A POST OFFICE BOX)
gainesville, FC
32614-2183
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: WIChalle Grant- AKINS
Name of New Registered Agent: Michelle Grant-Akins 1215 SE 124 Trivace
(Florida street address) New Registered Office Address:
Anneville Florida 32/04/
City) Florida 32641 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. It am familiar with and accept the obligations of the position.
Hichelle Grant-aken
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.

Mike Jokes, Fus Remove	, and burny billion,		
Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) V Change	<i>P</i>	Michelle Grant-Akins	1215 SE 1244 Terrece
Add		U	1215 SE 12th Terrece Gainisville, Fil 32641
Remove			
2) Change		Bessie G. Jackson	6012 NW 374 Drive
Add		·	Gains VIIIO, FC
Remove	\ /	Marin Tarke	1 2 202 NUL 191 & DIA
3) Change	<u> </u>	Glora Jackson	32653 22382 NW 176* Plc.
_ ▼ _ Add			High Springs, FL 32643
Remove			
4) Change		Jacquelyn Moorhead	6501 NW20# Plc.
Add		V	Gainesville, H
Remove	Deansta	•	·
5) _ V Change	S (RS)	Jean Kiner	1236 SE 13th Ave
Add			Gainesville, FZ
Remove			
6) Change	T	Beatrice C. Mayberry	10425 SE 12th Terrac Micanopy, FL 32667
Add		, ,	Micanopy, FL
Remove		Dage 1 of 4	3266/
		Page 2 of 4	

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.

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Example: X Change X Remove X Add	PT John I V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		Kate Mayberry	3606 SE 33 M Way gaincs VIIIC, FL 32641
Remove	(Chaplain) Sand Direction	101-11/1-14
2) Change	<u>C</u>	Janara Braaly	Gaingsville, FZ
Remove			<u> </u>
3) Change		Frances Rollins-Thoma	gainsville, E 32
Remove	(Historia	n)	32641
4) Change	<u>H</u>	Tracey Coward Johnson	James Ville, Fr. 32641
Remove	Parliame	ntarian	32071
5) Change Add Remove			
6) Change	IPP IT. II	Bessief Jackson	Gainesville, FZ 32653
Add (Immediate	, THOT IT COLUMNT)	32653

f amending or adding s attach additional sheets,	if necessary).	(Be specific)					
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The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date vartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment	(s)
There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated	09/06/19 Chille Strant-akin	
(By the chairs have not bee	nan or vice chairman of the board, president or other officer-if director in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
Pre	Sident (Title of person signing)	
	LITTE OF BERSON STRAINGT	