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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ACK CLUB, INC		
N13000003294 DOCUMENT NUMBER:		<u>-</u>	
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
MONICA FOLSOM			
	(Name of Contact P	'erson)	
PLANTATION BOOKKEEPING & PAYROLL	SERVICES, LLC		
· · · · · · · · · · · · · · · · · · ·	(Firn√ Compan	y)	
PO BOX 1264			
	(Address)		
PERRY, FL 32348			
	(City/ State and Zip	Code)	
MONICA@PLANTATIONBOOKKEEPING.C	ОМ		
E-mail address: (to be	used for future annual re	port notificatio	n)
For further information concerning this matter, p	lease call:		
MONICA FOLSOM	31	850 L	843-0259
(Name of Contact Pe	erson)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	S43.75 Filing Feetlus Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A) Di	reet Address mendment Sect ivision of Corpo he Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

BIG BEND TRACK CLUB, INC

(Name of Corporation as currently filed with the Florid	a Dept. of State)		
N13000003294			
(Document Nur	nber of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida N</i>	ot For Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corpor	ration:		
BIG BEND FITNESS CLUB, INC			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpo	rated" or the abbreviation "(	Corp." or "Inc."
B. Enter new principal office address, if applicable:	423 E ASH ST		
(Principal office address MUST BE A STREET ADDRES	<u>S</u> ) PERRY, FL 323		~
	-		<del></del>
		<u></u>	
C. Enter new mailing address, if applicable:			<u>-</u>
(Mailing address MAY BE A POST OFFICE BOX)			
			=== :
		· · ·	<del></del>
D. If amending the registered agent and/or registered o		rida, enter the name of the	
new registered agent and/or the new registered office	e address:		
Name of New Registered Agent:			
423 E /	ASH ST		
<del></del>	<u> </u>	(Florida street address)	<u>-</u>
New Registered Office Address:			
PERRY	<u> </u>	, Florida	32347
	(City)	(Zip Co	ode)
New Registered Agent's Signature, if changing Register	ed Agent:		
I hereby accept the appointment as registered agent. I am		ecept the obligations of the po	osition,
NI	mier ?	egistered Agent, if changing	
<del></del>	Signature of New R	egistered 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 X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)ChangeAdd	<u>P. VP. T</u>	MONICA FOLSOM	704 E LEON ST PERRY, FL 32347
<ul> <li>X Remove</li> <li>2) Change Add</li> </ul>	<u>P</u>	MONICA K FOLSOM	704 E LEON ST PERRY, FL 32347
Remove	<u>VP</u>	DAVID M FOLSOM	704 E LEON ST PERRY, FL 32347
4) Change	VP	JORDAN N PRAYTOR	1882 US 221 N PERRY, FL 32347
Remove  5) Change	<u>T</u>	REBEKAH L BUHLER	550 JIMMY ARCHER RD PERRY, FL 32347
Remove 6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
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The date of each amendment date this document was signed	(s) adoption:	10/27/2023	- · · · · ·			, if other than the
Effective date <u>if applicable</u> :	10/27/2023	o more than 90 d	lays after amena	lment file date)		

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(CHECK ONE)

Adoption of Amendment(s)

Dated _	10/30/2023
	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)
	MONICA K FOLSOM
	(Typed or printed name of person signing)