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SUCRULARY OF STACE



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

77.			
NAME OF CORPORATIO	A Touch of Glass Co N:	rvette Club, Inc.	
N 	113000004142		
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.	
Please return all corresponder	nce concerning this matte	r to the following:	
Anita Kaspick			
· · · · · · · · · · · · · · · · · · ·		(Name of Contact Pe	rson)
A Touch of Glass Corvette C	Club, Inc.		
		(Firm/ Company)
991 Rock Creek Street			
		(Address)	
Apopka, FL 32712			
		(City/ State and Zip C	Code)
RK421@bellsouth.net			
E-	mail address: (to be used	for future annual rep	ort notification)
For further information conce	ming this matter, please	eall:	
Anita Kaspick		at	678 316 5666
(Name of Contact Person		(Area Code) (Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pa	yable to the Florida D	Department of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing At Amendmen Division of P.O. Box 6	t Section Corporations	Am Div	eet Address nendment Section vision of Corporations fton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

A Touch of Glass Corvette Club, Inc.				
(Name of Corporation	as current	ly filed with the	Florida Dept. 965	(4) (D) 3 (4)
N13000004142			ACOLO NOT	12 1 44, 144
(Docum	ment Numbe	r of Corporation	(if known) CALLA	KRY OF STATE SSEE, FLORIDA
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida No</i>	t For Profit Corpo	pration adopts the following
A. If amending name, enter the new name of the	e corporatio	on:		
N/A				The new
name must he distinguishable and contain the word "Company" or "Co." may not he used in the nam	d "corporati <u>e</u> .	on" or "incorpor	rated" or the abbro	eviation "Corp." or "Inc."
		N/A		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	N/A		
D. If amending the registered agent and/or regis	stered offic	e address in Flor	ida, enter the nar	ne of the
new registered agent and/or the new register				
Name of New Registered Ayent:	Robert C.	Vehmeier		
	179 Lakec	rest Drive		
Now Businessed Office Addresses			(Florida street addr	ess)
New Registered Office Address:				33770
	Tavares			_, Florida
		(City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			cept thế obligation	is of the position.
-	Ze.	let C	Vahraii	1 Preside
	Sig	gnature of New R	egistered Agent, if	cnanging

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 De V Mike Je SV Sally Se	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Remove			
2) Change Add			
Remove 3) Change			
Add			
Remove 4) Change			
Add			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter chan (attach additional sheets, if necessary). (Be specific)	
N/A	

	A Part III
• • • • • • • • • • • • • • • • • • • •	
······································	
171.7.	, <u>,,, , ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,</u>

	N/A a date of each amendment(s) adoption: , if other than the
	e date of each amendment(s) adoption:, if other than the control of the c
	N/A
EH	(no more than 90 days after amendment file date)
Not doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the sument's effective date on the Department of State's records.
Ad	option of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes east 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.
	November 8, 2019 Dated
	Signature Kobert C. Lehmerr Theident
	(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)
	Robert C. Vehmeier
	(Typed or printed name of person signing)
	President
	(Title of person signing)

corphalp <corphelp@dos.myflorida.com>

11/1/2019 6:09 PM

RE: Amended Form

To 4rcv8@comcast.net <4rcv8@comcast.net>

Your filing was not filed and has been rejected for corrections on October 31, 2019. Below is a copy of the letter explaining the rejections and the corrections that need to be made. Their office number for assistance is 850-245-6050 press 0 for assistance.

October 31, 2019

ANITA KASPIC K 991 ROCK CREEK ST APOPKA, FL 32712

SUBJECT: A TOUCH OF GLASS CORVETTE CLUB, INC.

Ref. Number: N13000004142

We have received your document for A TOUCH OF GLASS CORVETTE CLUB, INC, and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There are missing pages. Please find enclosed the missing pages. Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The date of adoption of each amendment must be included in the document.

If the corporation is a NOT FOR PROFIT corporation it must be signed 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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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 filling of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor — Letter Number: 719A00022543

Rebellah We made the change for the Resident which was done after received this email from you. Unfortunately I didn't realize
that our former Precident was also listed as the Registered Agent. I've made the change on the form and am again submitting everything along with a check for 35.