N130000009184

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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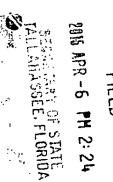
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FLORIDA CI	TRUS MODEL	TRAIN SOCIETY, INC.		
DOCUMENT NUMBER: N13000009	184			
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
DAVID MIKELSON				
	(Name of Contact Person)		
FLORIDA CITRUS MODEL TRAIN SOCIETY, INC.				
	(Firm/ Company)			
9340 LAGOON PL 305	;)			
	(Address)			
DAVIE, FL 33324-6749				
	(City/ State and Zip Code	2)		
david.mikelson@g	•			
E-mail address: (to be used	for future annual report r	notification)		
For further information concerning this matter, please	call:			
DAVID MIKELSON	_{at} 954	802-1137		
(Name of Contact Person)		ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made page	yable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	□\$43.75 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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation

FILED

FLORIDA CITRUS MODEL TRAIN SOCIETY, INC.

2015 APR -6 PM 2: 24

(Name of Corporation as currently filed with the Florida Dept. of State)
N1300009184

RECALIFARY OF STATE INCLINITIANSSEE, PLORIDA

(Document Number of Corporation (if known)

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:

ame must be distinguishable and contain the	word "corporation" or "incorporated	I" or the abbreviation "Corn " or
Company" or "Co." may not be used in the		. or mit accordination comp. of
B. Enter new principal office address, if a	oplicable:	
Principal office address <u>MUST BE A STRE</u>	SET ADDRESS)	
	 	
Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		
(Manning and Cos MANT BETTT OF T	TCL BOX	
		enter the name of the
If amending the registered agent and/or new registered agent and/or the new re		enter the name of the
		enter the name of the
new registered agent and/or the new re		enter the name of the
new registered agent and/or the new re Name of New Registered Agent:		enter the name of the
new registered agent and/or the new re	gistered office address:	
new registered agent and/or the new re Name of New Registered Agent:	gistered office address:	enter the name of the

Page 1 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.

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add		_		
Remove				
2) Change		_		
Add				
3)Change	 	_		
Add				
4) Change	-	_		
Add				
5) Change				
Add		_	11.0.1	
Remove				
6) Change		·-		
Add				

E.	If amending or addin	g additional Art	icles, enter change(s	<u>) here</u>
	(attach additional shee	ts, if necessary).	(Be specific)	

ARTICLE VIII DISSOLUTION CLAUSE

Upon the dissolution of this organization, assets shall be distributed
for one or more exempt purposes within the meaning of section 501(c)3
of the Internal Revenue Service code or corresponding section of any future
federal tax code or shall be distributed to the federal government,
or to a state or local government for a public purpose.

	e date of each amendment(s) adoption: this document was signed.	, if other than the
	ective date if applicable: 4 APRIL 2015	
_•-	(no more than 90 days after amendment file date)	
Ad	option 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 4 APRIL 2015	
	Signature Duf Mehrel	
	(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)	_
	DAVID MIKELSON	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	