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And MAR 10 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GEOrgia Bulldog Club of Jackson wilk. Inc
DOCUMENT NUMBER: N / 400000005
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John Boney (Name of Contact Person)
Georgia Bulldog Club of Jacksonville Inc. (Firm/Company)
2753 West Cove Lane
Jacksonville, Fl. 32207 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (904) 662-2424 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\begin{align*} \begin{align*} \begi

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 4 T T 5 5
of 14 MAR -7 AM 11:59
Georgia Bulldog Club of Jacksonville The. (Name of Corporation as currently filed with the Florida Dept. of State) NUKOOOOOOOOOO
NALLATIANSEE, LEORIDA
(Document Number of Corporation (if known)
(Document Number of Corporation (II known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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 <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
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: WA
Name of New Registered Agent:
(Florida street address)
New Registered Office Address:
, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

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>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	<u>VP</u>	Mary S. Daniel	274 Third Ave S. Jacksonville Beach.Fl. 32250
2) X Change Add	<u>P</u>	John Boney	2753 West Cove Land Jacksonville, Fl.
Remove 3) Change Add Remove			32207
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

utach additional sheets, ij	f necessary).	icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption: MA			, if other than the
	ective date <u>if applicable</u> :	N/A (no more than 90 days after amendment file date)	_
Ada	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.	
M	There are no members or me adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
	Dated	arch 6, 2014	
	have not	airman or vice chairman of the board, president or other officer-if directors seen selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)	
	J	Typed or printed name of person signing)	
		(Title of person signing)	
		(time of person signing)	