

N14000009271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

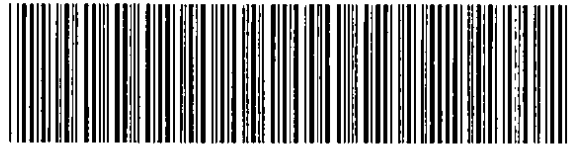
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/17/23--01013--008 **52.50

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2023

andrea bennett
1108 SUPERIOR CT
WINTER SPRINGS, FL 32708

SUBJECT: SEMINOLE JUNIOR ANGLERS INC.
Ref. Number: N14000009271

We have received your document for SEMINOLE JUNIOR ANGLERS INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please ensure that you date and sign the last page.

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

Morgan E Lovett
Regulatory Specialist II

Letter Number: 623A00018862

SEP 01 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Seminole Junior Anglers Inc.

DOCUMENT NUMBER: N14000009271

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andrea Bennett

(Name of Contact Person)

(Firm/ Company)

1108 Superior Ct.

(Address)

Winter Springs, FL 32708

(City/ State and Zip Code)

andreadpc1@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea Bennett

(Name of Contact Person)

321

at

662-4595

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SEP 1 11 44 AM '06
TE

Articles of Amendment
to
Articles of Incorporation
of

Seminole Junior Anglers Inc.

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

N14000009271

(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:

A. If amending name, enter the new name of the corporation:

NA

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**)

1108 Superior Ct.

Winter Springs, FL 32708

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1108 Superior Ct.

Winter Springs, FL 32708

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:

Troy Bennett

1108 Superior Ct.

(Florida street address)

New Registered Office Address:

Winter Springs

(City)

Florida

(Zip Code)

32708

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

FILED
JUN 14 11 21 AM '16
TALLAHASSEE, FL
CLERK OF CIRCUIT COURT

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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|-----------------|--------------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add | <u>Director</u> | <u>Dave DiMauro</u> | <u>1711 Adams Street</u> <u>Longwood, FL 32750</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add | <u>Director</u> | <u>Elizabeth DiMauro</u> | <u>1711 Adams Street</u> <u>Longwood, FL 32750</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Director</u> | <u>Troy Bennett</u> | <u>1108 Superior Ct.</u> <u>Winter Springs, FL 32708</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Director</u> | <u>Andrea Bennett</u> | <u>1108 Superior Ct.</u> <u>Winter Springs, FL 32708</u> |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

NA

10/21/2011 11:45 AM
DATE

Lined area for text entry.

2023 SEP - 1 11 41 AM
STATE OF NEW YORK
DEPT. OF STATE

The date of each amendment(s) adoption: 08/01/2023
date this document was signed. if other than the

Effective date if applicable: 08/01/2023
(no more than 90 days after amendment file date)

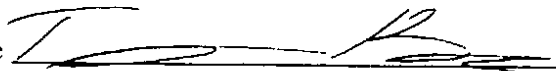
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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 08/0/23

Signature 
(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)

Troy Bennett
(Typed or printed name of person signing)

Director
(Title of person signing)

2023 Sep -1 Fri 4:45
STC
CMT
ATE