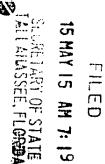
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(Re	equestor's Name)	
(Ad	ldress)	<u>.</u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		. :
	Office Use On	ilv



05/08/15--01009--011 \*\*43.75





TO: Amendment Section

## **COVER LETTER**

Division of Corporation	1,5			
NAME OF CORPORATION	South Dade Mothers	of Multiples Club C	orp.	
DOCUMENT NUMBER:	N14000009308			
	<del></del>		····	
The enclosed Articles of An	sendment and fee are subr	nitted for filing,		
Please return all corresponde	ence concerning this matte	er to the following:		
Leslic McConachie				
		(Name of Contact Po	erson)	
South Dade Mothers of Mul	tiples Club Corp.			
		(Firm/ Company	<i>'</i> )	
11432 SW 104 Avenue				
		(Address)		
Miami, FL 33176				
		(City/ State and Zip	Code)	
southdademulptiles@yahoo	.com, lrpsk305@gmail.co	m		•
E	-mail address; (to be used	for future annual rep	ort notification	1)
For further information cond	erning this matter, please	call:		
Leslie McConachie		at	786	897-5893
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the i	following amount made pa	yable to the Florida )	Department of	State:
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is sed)

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 14, 2015

LESLIE MCCONACHIE 11432 SW 104 AVE MIAMI, FL 33176

SUBJECT: SOUTH DADE MOTHERS OF MULTIPLES CLUB CORP.

Ref. Number: N14000009308

We have received your document for SOUTH DADE MOTHERS OF MULTIPLES CLUB CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 415A00010191

## Articles of Amendment to Articles of Incorporation of

ion:	en)  Profit Corporation adopts the following  The new or the abbreviation "Corp." or "Inc."
ion: sion or "incorporated" (	Profit Corporation adopts the following  The new
lon: sion" or "incorporated" (	The new
sion" or "incorporated" (	
)	
as address in Florida en	star the name of the
	tel the haute of the
W 85 Avenue	
(Flari	da zereet address)
	Florida 33157
(City)	(Zip Code)
Agent; imiliar with and accept th	e abligations of the position.
Signature of New Register	ed Agent, if changing
1	(City)  1 Agent; amiliar with and accept th

Page 1 of 4

5 MAY 15 AM 7: 1

FILED

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.

Type of Action (Check One)	X_Change X_Remove X_Add	PT John D V Mike J SV Sally S	lo <u>nes</u>	
	Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Add Remove 3 ) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add	Add			
3 ) Change Add	Add			
4) Change	3 ) Change			
	4) Change Add			
6) Change Add	Add			
	6) Change Add	<del></del>		

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
(, 5.,5, 7,,7, 7,,7, 7,,	(no speedie)
	<del>_</del>
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	•
<u>-</u> · ·	

Page 3 of 4

Гће	date of each amendme	Scptember 11, 2014	if other than the
	this document was sign		
Effe	tive date <u>if applicable</u>		
		(no more than 90 days after amendment file date)	
		this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	ot be listed as the
idol	ption of Amendment(e	) ( <u>CHECK ONE</u> )	
	The amendment(s) was was/were sufficient for	were adopted by the members and the number of votes east for the amendment(s) approval.	
כ	There are no members adopted by the board o	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	Dated <u>Ma</u>	y 15, 2015	
	Signature	hadie helonadie	
	hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	ı	Leslie McConachie	
	-	(Typed or printed name of person signing)	
	,	Vice President	
	-	(Title of person signing)	