N140000009318

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Amend

APR 1 7 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Italian AMERICAN SOCIAL CLUBOFTAMPA Bay, INC DOCUMENT NUMBER: <u>N/400000</u> 9318 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARANO (Name of Contact Person) (Firm/ Company) 21226 Lake Vienna Dr. (Address) Land O Lakes FL 34638
(City/ State and Zip Code) For further information concerning this matter, please call: at <u>440 - 263 - 2953</u> (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigsup \$43.75 Filing Fee & \$\Bigsup \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

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

(Additional Copy is Enclosed)



March 29, 2017

AL MARANO 21226 LAKE VIENNA DR. LAND O'LAKES, FL 34638

SUBJECT: ITALIAN AMERICAN SOCIAL CLUB OF TAMPA BAY, INC.

Ref. Number: N14000009318

We have received your document for ITALIAN AMERICAN SOCIAL CLUB OF TAMPA BAY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Letter Number: 217A00006045

Irene Albritton
Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 15, 2017

AL MARANO 21226 LAKE VIENNA DR. LAND O' LAKES, FL 34638

SUBJECT: ITALIAN AMERICAN SOCIAL CLUB OF TAMPA BAY, INC.

Ref. Number: N14000009318

We have received your document for ITALIAN AMERICAN SOCIAL CLUB OF TAMPA BAY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s)

The document must have original signatures.

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

Irene Albritton Regulatory Specialist II

Letter Number: 817A00003048

www.sunbiz.org

Articles of Amendment to

Articles of Incorporation of

Italian American So (Name of Corporation as cur	cial Club	OF TAMPA BA	7, INC
	rently med with the r	orida Dept. of State)	,
N 1400000 9318	umber of Corporation (if	<u> </u>	
(Document No	imber of Corporation (ii	(Known)	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not</i>	For Profit Corporation adopts th	e following
A. If amending name, enter the new name of the corpo	ration:		m)
name must be distinguishable and contain the word "corp	oration" or "incornora	ted" or the abbreviation "Corn"	The new " or "Inc."
"Company" or "Co." may not be used in the name.	orunon or meorporu	ica or me appreviation corp.	<i>O</i> 1110.
B. Enter new principal office address, if applicable:	N	l A	
(Principal office address MUST BE A STREET ADDRE			يـــــــــــــــــــــــــــــــــــــ
			<u>= -11</u>
			3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N.	A	2 0 1
		\$20 E	
			20. 0
		. ,	<u> </u>
D. If amending the registered agent and/or registered of	office address in Floric	la enter the name of the	
new registered agent and/or the new registered office		ia, enter the name of the	
Name of New Registered Agent:	NIA	L	
Nume of New Registered Agent.		<u> </u>	
		(Florida street address)	
New Registered Office Address:		Triorida street dadressy	
		, Florida	
	(City)	(Zip Code)	
		•	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am	rea Agent: n familiar with and acce	ept the obligations of the position	l.
25, 2000pt in appointment an regime on agent. Tur		L	
·	Signature of New Reg	istered Agent, if changing	

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 A Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change X Add	<u>T</u>	JUDITH ALDROVANDI	11818 BROWN BS
Remove 2) Change Add	<u> </u>	Basil A. Piazza	10360 Lightner Bridge Dr Tampa FL 33626
Remove 3) Change Add Remove	<u> </u>	Thomas J. Repetti	18931 Maisons Dr Lu+2, FL 33558
4) Change Add Remove	<u>vp</u>	Richard Domino	12018 Brewster Dr Tampa FL 33626
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Arti uttach additional sheets, if necessary).	(Be specific)	. , . , .			
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The date of each amendment(s) adoption date this document was signed.	otion:	2-1-2017		if other than the
Effective date if applicable:		2-1-2017		
	(no more than	90 days after amendment file	: date)	
Note: If the date inserted in this block document's effective date on the Depa		• • • • •	uirements, this date will not be	listed as the
Adoption of Amendment(s)	(CHECK ON	<u>NE</u>)		
The amendment(s) was/were adop was/were sufficient for approval.	oted by the member	rs and the number of votes ca	st for the amendment(s)	
☐ There are no members or member adopted by the board of directors		on the amendment(s). The am	endment(s) was/were	
Dated 2-	1-2017 Sel have)		
Signature	Jah /rive	enjano		
(By the chairm have not been		n of the board, president or of corporator – if in the hands of by that fiduciary)	•	
	Jack P) ROVにれるAPの d or printed name of person s		
	(Турес	d or printed name of person s	igning)	
	Presid	den † (Title of person signing		
		(Title of person signing)	