N14000010754

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: CENTRAL Flor	ides Youth Club of America Corp
DOCUMENT NUMBER: N140001075	
The enclosed Articles of Amendment and fee are submitted	I for filing.
Please return all correspondence concerning this matter to t	he following:
Placide VanHick	E bucca lac
Plarida Youth Club	ne of Contact Person)
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THILLS TA	x Corn
((Firm/ Company)
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ett Long 1	(Address)
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Deer Var	State and Zin Code)
(City	/ State and Zip-Code)
	uture annual report notification)
For further information concerning this matter, please call:	
Authory Mills (Name of Contact Person)	at Silver 8 35 - 1835 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
Certificate of Status Ce (Ac	3.75 Filing Fee & Certificate of Status PO A LALAD 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

Articles of Amendment to Articles of Incorporation

of

Central Ploridas Yorth alsh of America
(Name of Corporation as currently filed with the Florida Dept. of State)
N140∞2 12754
(Document Number of Corporation (if 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:
Florida Youkh Clarb of America Inc 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) Orlanda, FL 32810
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Stoy N OLLNCE BLOSSOM Trl STE 124 Orlands, Ft 3280
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: Shave Karasgoille 5
Name of New Registered Agent: Shervel K Carrasquillo 5
Name of New Registered Agent: Shervel K Carrasquillo Sloy NO range Blossom Trl Steloy New Registered Office Address: Octondal Ft 32 (Elorida street address) Octondal Ft 32 (Elorida 3281)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered 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 X Add	PT John Dr V Mike Jo SV Sally Sr	ones .	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add	D	Keuin Gilmore	Orland-, FE 32808
2) Change Add		Alexandra J Baker	U(12) NPINE HILLIAD Orlando FC 3210)
Remove 3) Change Add Remove		Nathan Jackson	Amitquille My 11701
4) Change Add	_P_	Shervel K Carrasquillo	Slay Workychloson Trl Steloy
Remove 5) Change Add		Johnny Comsaguillo	SION HURANGE & SIDATEL SECTOR
Remove 6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	2023 OCT 16 P
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The date of each amendment(s) adoption: date this document was signed.	11-6-23	<u> </u>	, if other	than the
Effective date if applicable:	11-6-23 ore than 90 days after amendn	uent file date)		
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory fi		ill not be listed a	s the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

<u> </u>	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 11-6-23
	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)
	Author Mills (Typed or printed name of person signing)
	Treasurer

(Title of person signing)

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