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SECRETARY OF STATE

311/21

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATI		F SOUTHWEST FLC	ORIDA, INC	
DOCUMENT NUMBER:	N15000001631			
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	ter to the following:		
PHIL S. MANNINO				
		(Name of Contact Pe	erson)	
		(Firm/ Company	<i>(</i>)	
19831 QUISTO ST				
	, ,,,	(Address)		
VENICE, FL 34293				
-		(City/ State and Zip	Code)	
JAGCLUBOFSWF@GMA	IL.COM			
	-mail address: (to be use	d for future annual rep	ort notification	1)
For further information con	cerning this matter, please	e call:		
PHIL S. MANNINO		at	407	
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
inclosed is a check for the	following amount made p	ayable to the Florida l	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee icate of Status ied Copy is issed)
Mailing A	Address		reet Address	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

FILED

JAGUAR CLUB OF SOUTHWEST FLORIDA, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N15000001631 (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: 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) . 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: (Florida street address) New Registered Office Address: , Florida __ (City) (Zip Code) v Registered Agent's Signature, if changing Registered Agent: reby 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.

mple: Change Remove Add	<u>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
ee of Action eck One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add	<u>T</u>	JANET DEILE	9436 TRESURE LAKE CT ST JAMES CITY, FL 33956
× Remove Change Add	<u>T</u>	CHRISTINE KITTS	11769 ALTAMONTE CT VENICE, FL 34293
Remove Change Add Remove			
Change Add	.		
Remove Change Add			
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imending or ad ich additional s	ding additional heets, if necessar	Articles, enter change(s) here: y). (Be specific)	
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of each amendment(s) adoption:	other than
nte <u>if applicable</u> : (no more than 90 days after amendment file date)	

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

Amendment(s) (CHECK ONE)

ndment(s) was/were adopted by the members and the number of votes cast for the amendment(s) 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 Am. 12, 2021 Signature Manneson
(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)
PHIL S. MANNINO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)