NI5000002015

(Requestor's Name)					
— SWTP 2775 NW 49th / —Suite 205-227 Ocala FL 34482	2				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Dr	cument Number)				
(50	oument Humber)				
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				





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2015 OCT 23 PH 1: 48
SECRETARY OF STATE
AND SEE, FLORIDA

Amend

OCT 23 2015
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations'

NAME OF CORPORATION: <u>Second</u> Wind Thoroughburd Proje
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dayle Eldredge (Name of Contact Person)
Second Wind Thorough bred Project (Firm Company)
2775 N.W. 49th Avenue Suite 205-227 (Address)
Ocala, TL- 34482 (City/ State and Zip Code)
Second Wind Hos@ fahoo. Lo m E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dayle Eldredge at 910-986-8725 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status
Mailing Address Amendment Section Amendment Section Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as	currently file	ed with the Flo	rida Dept. of	State)
Second Wind Thorough (Document	level	Project	INC.	N150000041
(Document	t Number of (Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this	Florida Not Fe	or Profit Cor	poration adopts the following
A. If amending name, enter the new name of the co	rporation:			
				The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" (or "incorporate	d" or the abb	previation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<u>. </u>			
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)			
C. Enter new mailing address, if applicable:				**
(Mailing address MAY BE A POST OFFICE BO)	X)			
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				5 5 7
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D. If amending the registered agent and/or register new registered agent and/or the new registered of the n			, enter the na	ame of the
Name of New Registered Agent:				- 'o'
				gm o
		(F	lorida street add	dress)
New Registered Office Address:				
				, Florida
	(Ci	ty)		(Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent	+•		
hereby accept the appointment as registered agent.			the obligation	ons of the position.
	Signatu	re of New Regis	tered 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 Do V Mike Jo SV Sally Si	ones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	<u>S</u>		Morniston, FL. 32468
2) Change Add Remove		Linda Kratochwill	17 Congress Ave. Sanatoga Springs, Ny 12866
3) Change Add Remove	<u>C</u>	Melissa Cason-Kinne	0 (ala, FL. 34471
4) Change Add Remove	77_	Grace Hemingway-M	arnell 1039 Eagle Ridge Path Hernando, IL. 34442
5) Change Add Remove			
6) Change Add Remove			

The date of	each amendment(s) adoption:	, if other than the
date this doc	ument was signed	
Effective da	te if applicable:	
	(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 neffective date on the Department of State's records.	not be listed as the
Adoption of	Amendment(s) (<u>CHECK ONE</u>)	
	endment(s) was/were adopted by the members and the number of votes cast for the amendment(s) re sufficient for approval.	
	re no members or members entitled to vote on the amendment(s). The amendment(s) was/were d by the board of directors.	
	Dated 10-13-15	
	Signature Wayle Eldred	
	(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)	
	Dayle Eldredge (Typed or printed name of person signing)	
	President (Title of person signing)	