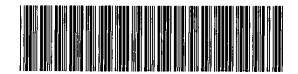
## N1500000 3535

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: GUTACL	SAINTS TRACK Club, INC.
DOCUMENT NUMBER: <u>N15000035</u>	
The enclosed Articles of Amendment and fee are sub-	omitted for filing.
Please return all correspondence concerning this matter	-
rease retain an correspondence concerning and manu	to the following.
	<u>:</u>
	(Name of Contact Person)
	· (Firm/ Company)
	(Time Company)
	(Address)
	(City/ State and Zip Code)
E-mail address; (to be used	d for future annual report notification)
	·
For further information concerning this matter, please	e call:
	at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	avable to the Florida Department of State:
\$35 Filing Fee \$\Bullet\$ \$43.75 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy □ Certificate of Status
Colimono VI Simuli	(Additional copy is Certified Copy
	enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassec, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corpora</i> amendment(s) to its Articles of Incorporation:	ntion adopts the following
A. If amending name, enter the new name of the corporation:	202
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreve "Company" or "Co." may not be used in the name.	iation "Corp." or Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name new registered agent and/or the new registered office address:	of the
Name of New Registered Agent:	
(Florida street address)  New Registered Office Address:	
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of	of the position.
Signature of New Registered Agent, if changing	

Page 1 of 4

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: XChange X Remove X Add	<u>V</u> <u>M</u>	h <u>n Doe</u> ike Jones ll <u>y</u> Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	_
1) Change	P	EARL A. JACKSO	J 513 3. MAin :	st.
Remove				
2) Change				
Add Remove				
3) Change				
Add		·	<del></del>	
Remove				
4) Change Add				
Remove				
5) Change				
Add				
Remove				
6) Change Add		-11-11-11-11-11-11-11-11-11-11-11-11-11		
Remove				

E. If amending or adding addition (attach additional sheets, if neces.	al Articles, enter ch	ange(s) here:	
хмася ааанопаі sneets, у neces.	sary). (Be specific)		
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The date of each amendment(s) adop	tion;	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	<del></del>
	•	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 4-16. Signature Earl	2015	
Signature <u>Earl</u>	J. Carkon	
(By the chairman	n or lice chairman of the board, president or other officer-if directors	
	clected, by an incorporator – if in the hands of a receiver, trustee, or	•
other court app	pinted fiduciary by that fiduciary)	
EARL		
(T <sub>3</sub>	ped or printed name of person signing)	
	P	
	(Title of person signing)	