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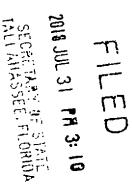
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JUL 3 1 2018
I ALBRITTON

COVER LETTER

• TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Slub of International Drive Orlando Foundation INC.
N15000004983	
The enclosed Articles of Amendment and fee	
Please return all correspondence concerning the	is matter to the following:
Erdal Ersoy	
	(Name of Contact Person)
The Rotary Club of International Drive Orland	do Foundation INC.
	(Firm/ Company)
2054 Blairmoor Place	
	(Address)
Apopka, FL 32703 US	
	(City/ State and Zip Code)
ersoyerdal@hotmail.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	please call:
Erdal Ersoy	321 946-2727
(Name of Contact	
Enclosed is a check for the following amount i	nade payable to the Florida Department of State:
S35 Filing Fee	Fee & Status Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional Copy is Enclosed) S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
ADEDORIO SECTION	AIRTHORPIU SCCHON

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



July 19, 2018

ERDAL ERSOY ROTARY CLUB OF INTERNATIONAL DRIVE 2054 BLAIRMOOR PLACE APOPKA, FL 32703

SUBJECT: THE ROTARY CLUB OF INTERNATIONAL DRIVE ORLANDO

FOUNDATION INC.

Ref. Number: N15000004983

We have received your document for THE ROTARY CLUB OF INTERNATIONAL DRIVE ORLANDÓ FOUNDATION 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

As per this letter, Please kindly find our revised application enclosed. The Rotary Club of International Drive Orlando Foundation INC.

Letter Number: 318A00014841

Articles of Amendment to Articles of Incorporation of

The Rotary Club of International Drive Orlando Foundation INC.

(Name of Corporation as cur	ently filed with the Florida De	ept, of State)
N15000004983		
(Document Nu	mber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For Prof</i>	it Corporation adopts the following
A. If amending name, enter the new name of the corpo	ation:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorporated" or t	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	SS)	
	<u></u> ,	
		TALE SE
	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		克兰 2
		77.X
D. If amending the registered agent and/or registered o	Mice address in Florida, enter	the name of the
new registered agent and/or the new registered offic		THE HALL OF LIFE
Name of New Registered Agent:		
	(Florida st	reet address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		ligations of the position.
	Signature of New Registered A	gent, 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		Doe : Jones : Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	INFANTINI, FRANCISCO L.	465 CASCADING CREEK LANE
Add			WINTER GARDEN, FL 34787
X Remove			
2) Change	P	OLIVO-GOYANES, VERONICA	2925 SOMERSWORTH COURT
Add			ORLANDO, FL 32825
X Remove			
3) X Change	P	EVANS, CHRISTOPHER	8755 THE ESPLANADE
Add	Title and La	st name Spelling Correction	APT. 106
Remove			ORLANDO FL 32836
4) Change	PE	BOOKER, TERRILL MAURICE	15023 SAWGRASS BLUFF DR.
X Add	PE = Presid	ent Elect	WINTER GARDEN, FL. 34787
Remove			
5) X Change	S,AT	OLIVO-GOYANES, VERONICA	2925 SOMERSWORTH COURT
Add	S.AT = Sea	etary & Assistant Treasurer	ORLANDO, FL. 32825
Remove			
6) Change			
Add			
Remove			

E.	E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
	(attach additional sheets, if necessary).	(Be specific)			
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AFTER ABOVE AMENDMENTS OUR LIST OF OFFICERS AND/OR DIRECTOR SHOULD READ OF FOLLOWS:

TITLE : PRESIDENT

NAME : EVANS, CHRISTOPHER

ADDRESS : 8755 THE ESPLANADE APT 106

CITY-STATE-ZIP: ORLANDO, FL 32836

TITLE : TREASURER

NAME : ERSOY, ERDAL

ADDRESS : 2054 BLAIRMOOR PLACE

CITY-STATE-ZIP: APOPKA, FL 32703

TITLE : SECTERARY, ASST. TREASURER

NAME : OLIVO-GOYANES, VERONICA

ADDRESS : 2925 SOMERSWORTH COURT

CITY-STATE-ZIP: ORLANDO, FL 32825

TITLE : PRESIDENT ELECT

NAME : BOOKER, TERRILL MAURICE

ADDRESS : 15023 SAWGRASS BLUFF DR.

CITY-STATE-ZIP: WINDER GARDEN, FL 34787

		JULY 1, 2018 .	
	date of each amer this document was	dment(s) adoption:	_, if other than the
		JULY 1, 2018	
Effe	ective date <u>if appli</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not bute on the Department of State's records.	oc listed as the
Ado	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	JULY 27, 2018	
	Signature	ELDAL ENSON TUE	
		(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)	_
		ERDAL ERSOY	
		(Typed or printed name of person signing)	
		TREASURER	
		(Title of person signing)	