N15000004983

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: THE ROTAR	RY CLUB OF INTERNATIONAL DRIVE ORLANDO FOUNDATION INC
DOCUMENT NUMBER: N15000004983	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
ADRIANA SANFELICE	
	(Name of Contact Person)
THE ROTARY CLUB OF INTERNATION	AL DRIVE ORLANDO FOUNDATION INC.
	(Firm/ Company)
14150 TITLE WAY	
	(Address)
WINTER GARDEN, FL 34787	
	(City/ State and Zip Code)
ROTARIANASANFELICE@GMAIL.COM	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	, please call:
ADRIANA SANFELICE	at (407) 820-1958
(Name of Contact	
Enclosed is a check for the following amount r	made payable to the Florida Department of State:
S35 Filing Fee \$43.75 Filing Fee Certificate of S	
Moiling Address	Streat Address

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

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2022 JUL 27 PH 3:54

SECRETARY OF ACT

THE ROTARY CLUB OF INTERNATIONAL DRIVE ORLANDO FOUNDATION INC.

(Name of Corporation as currently filed with the	Florida D	ept. of State)		Harry Comments
N15000004983				
(Docum	ent Numbe	er of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida No</i>	ot For Profit Corpor	ration adopts the following
A. If amending name, enter the new name of the	corporati	on:		
				The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorpoi	rated" or the abbrev	viation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		14150 TITLE WAY		
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)	WINTER GARDEN	I, FL 34787	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	14150 TITLE WAY	,	
		WINTER GARDEN	, FL 34787	
D. If amending the registered agent and/or regis			rida, enter the nam	e of the
new registered agent and/or the new registere	ed office at	<u>iaress:</u>		
Name of New Registered Agent:	ADRIANA	SANFELICE		
	14150 TITLE	WAY		
Now Business J.O.Co. Address			(Florida street addres	7)
New Registered Office Address:				
	WINTER G	ARDEN	,	Florida 34787 (Zip Code)
		(Ciţy)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered . 1. I am fan	Agent: nilibradith and ac	cefi the obligations	of the position.
	Siş	nature of New Re	egistered Agent, if co	hanging

ADDITIONAL SHEET ATTACHED

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	<u>I'T</u> <u>John D</u> <u>V</u> <u>Mike Jo</u> <u>SV</u> <u>Sally S</u>	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	President July 2021 to June 2022	CHEN, CHUN PING HELEN	4938 WATERVISTA DRIVE ORLANDO, FL 32821
2) Change Add	Secretary July 2021 to June 202	EVANS, CHRISTOPHER	8755 THE ESPLANADE APT 106 ORLANDO, FL 3236
X Remove Change Add X Remove	Tressurer, July 2021-June 2022	OLIVO-GOYANES, VERONICA	2925 SOMERSWORTH COURT ORLANDO, FL 32625
Add	Director July 2021 to June 2022	Goyanes, Andres	2925 SOMERSWORTH COURT ORLANDO, FL 32825
	resident J <u>uly 2022 to</u> June 2023	Ryan, Lacee	c/o ORLANDO PD 1250 W SOUTH ST.
6) Change Add	Secretary July 2022 to June 2023	SANFELICE, ADRIANA	ORLANDO, FL 32805 14150 TITLE WAY WINTER GARDEN, FL 34787
Remove E. <u>If amending or</u> (attach additional	adding additional Artic I sheets, if necessary).	les, enter change(s) here: (Re specific)	(

ADDITIONAL SHEET

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(Attach additional sheets, if necessary)

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Example: X.Change X.Remove X.Add		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	Treesurer, July 2022 to June 20	TAMBURUS, MICHELLI DENARDI	4122 YELLOW PINE LN UNIT 29-1 ORLANDO, FL 32811
2) Change Add			
Remove 3) Remove 4 Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or a	dding additional Act sheets, if necessary).	icles, enter change(s) here: (Be specific)	

AFTER ABOVE AMENDMENTS OUR LIST OF OFFICERS AND/OR DIRECTOR SHOULD READ OF FOLLOWS:

TITLE:

PRESIDENT JULY 2022 TO JUNE 2023

NAME:

RYAN, LACEE

ADDRESS:

c/o ORLANDO PD 1250 W SOUTH ST.

CITY, STATE - ZIP:

ORLANDO, FL 32805

TITLE:

SECRETARY JULY 2022 TO JUNE 2023

NAME:

SANFELICE, ADRIANA

ADDRESS:

14150 TITLE WAY

CITY, STATE - ZIP:

WINTER GARDEN, FL 34787

TITLE:

TREASURER JULY 2022 TO JUNE 2023

NAME:

TAMBURUS, MICHELLI DENARDI

ADDRESS:

4122 YELLOW PINE LN UNIT 29-1

CITY, STATE - ZIP:

ORLANDO, FL 32811

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	+
he date of each amendment(s) adoption: JULY 1, 2022	
ate this document was signed.	, if other than th
ffective date if applicable: JULY 1, 2022	
ffective date if applicable: JULY 1, 2022 (no more than 90 days after amendment file da	tta)
ote: If the date inserted in this block does not meet the applicable statutory filing requirecument's effective date on the Department of State's records.	rements, this date will not be listed as the
solved the off the Department of State's records.	
doption of Amendment(s) (CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were 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 Suly 31 20x2 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)
ADRIANA SANFELICE
(Typed or printed name of person signing)
SECRETARY
(Title of person signing)