## N1500006134

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TALLAHASSEE, FLORDA

JUL 24 2018 S. YOUNG

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	storical Society Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Robert Fisher	
	(Name of Contact Person)
	(Firm/ Company)
631 Wilks Avenue	
	(Address)
Orlando, FL 32809	
<u> </u>	(City/ State and Zip Code)
bjstar@cfl.rr.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Robert Fisher	407-855-7202
(Name of Contact	Person) at
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of S	Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee  tatus
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corr	ooration as curren	tly filed with the Florida Dept. of State)	
Pine Castle Historical Society Inc.	N15000006134		
	(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		es, this Florida Not For Profit Corporation adopt	s the following
A. If amending name, enter the new nam	ne of the corporati	on:	
			The new
name must be distinguishable and contain "Company" or "Co." may not be used in t		tion" or "incorporated" or the abbreviation "Co.	rp," or "Inc."
B. Enter new principal office address, if	applicable:	631 Wilks Avenue	_
Principal office address MUST BE A ST	REET ADDRESS	Orlando, FL 32809	
		•	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>able:</u> FFICE BOX)		
	, , , , , , , , , , , , , , , , , , ,		35 C
			<u></u>
). If amending the registered agent and	l/or registered offic	ce address in Florida, enter the name of the	
new registered agent and/or the new	registered of fice a	ddress:	3. O
Name of New Registered	'Agent'		
		(Florida street address)	_,
New Registered Office :	Address:	THO ME SILVER MINES	
		, Florida	
		(City) (Zip Code	
New Registered Agent's Signature, if ch	anging Registered	Agent: miliar with and accept the obligations of the posit	tion
негену ассерь те арронитен аз register	сун адут 1 ат ја	matar with and accept the omigations of the post	isteri.
		ignature 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 Doc 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 Doc. PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VC	Anthony Mickel	631 Wilks Avenue
Add			Orlando, FL, 32809
X Remove			
2) Name Change	Т	Betty Jo Staton	3421 East Kaley Ave.
N Add			Orlando, FL 32806
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending (attach addit	g or adding additional Art tional sheets, if necessary).	icles, enter change (Be specific)	( <u>s) here</u> :			
Chairman: Ro	bert J Fisher					
Secretary: Shi	rley J. Cannon	··				
Treasurer: Bet	ty Jo Staton	•				
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		July 1, 2018	
The da	te of each ame	ndment(s) adoption:	, if other than the
date thi	s document was	signed.	
Effectiv	ve date <u>if appli</u>	cable:	
	<u> </u>	(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Adopti	on of Amendm	ent(s) ( <u>CHECK ONE</u> )	
	ne amendment(s as/were sufficier	a) was/were adopted by the members and the number of votes cast for the amendment(s) and for approval.	
		abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
	Dated	July 12, 2018	
	Signature	: The first	-
	· ·	(By the chairman or rice 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)	
		Robert J. Fisher	
		(Typed or printed name of person signing)	
		Chairman	
		(Title of person signing)	