

N:15 000000 7270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

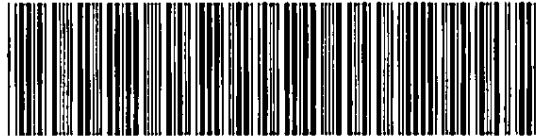
Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

NO\$

Office Use Only



500347180365

09/29/20--01033--016 **35.00

S T L F

SEP 29 2020

2020 SEP 24 PM 5:45

Hand
All



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 SEP 15 11:02

September 15, 2020

JOANNE ALCORN
256 LOMA DR
WINTER HAVEN, FL 33881

SUBJECT: AIR RACE EDUCATION - WINTER HAVEN, INC.
Ref. Number: N15000007270

We have received your document for AIR RACE EDUCATION - WINTER HAVEN, INC., however, upon receipt of your document no check was enclosed. Please return ~~your document~~ along with a **check** or **money order** made payable to the Department of State ~~for \$35.00.~~

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 820A00017501

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Air Race Education - Winter Haven 7027-111-01-111-01-01

DOCUMENT NUMBER: N15000007270

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JoAnne Alcorn

(Name of Contact Person)

(Firm/ Company)

256 Loma Dr
(Address)

Winter Haven FL 33881

(City/ State and Zip Code)

joannealcornl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JoAnne Alcorn 317 514-0371
 _____ at _____
 (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 ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

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

Air Race Education - Winter Haven, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N15000007270

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Air Race Education - Lakeland, Inc.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

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 of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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 the position.

Signature of New Registered Agent, if changing

2020 SEP 24 PM 5:46

The event is the youth educational activities associated with the start of the women's air race, June 2021, hosted by Lakeland

Linder International Airport, Lakeland, FL.

The date of each amendment(s) adoption: April 1, 2020, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

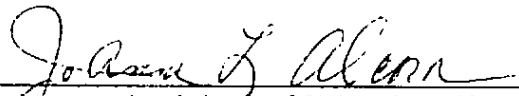
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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 July 18, 2020

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)

JoAnne Alcorn

(Typed or printed name of person signing)

President

(Title of person signing)