N15000007540

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
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SECRETARY OF STATE
TALL ABASSEE, FLORID.

JUN 0 9 ZOTG C. CARANIHERS

TO: Amendment Section Division of Corporations

NAME OF CORPO	PALM HARBOR	NEWCOMERS CLUB, IN	C
DOCUMENT NUM	BER: N15000007540		THE ALLEST TO STATE OF THE STAT
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Jo Lawrence		
	······································	Name of Contact Persor	1
	PALM HARBOR NEWCOM	IERS CLUB, INC	
		Firm/ Company	
	1630 Algonquin Dr		
		Address	
	Clearwater FLm33755		
	·	City/ State and Zip Code	e
jola: ———	wrencenpc@yahoo.com	- Jagwi	Include yahoo. com
	E-mail address; (to be us	ed for future/annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Jo Lawrence		at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment 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)
M	niling Addross	Street	Address

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

Articles of Amendment to Articles of Incorporation

	Articles of Incorpo	oration	- 14
	of		
ALM HARBOR NEWCOMERS CLUB	B, INC		まご まご
(<u>Name o</u>	f Corporation as currently file	ed with the Florida Dept. of State)	<u> </u>
N15000007540			Mo.
	(Document Number of Cor	poration (if known)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this <i>Flor</i>	ida Profit Corporation adopts the follow	ring amendmen
. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cont Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	"company," or "incorporated" or the A professional corporation name mus "	aboreviation st contain the
3. Enter new principal office address, Principal office address MUST BE A S			
	, 		·
C. Enter new mailing address, if appli	cable:		
(Mailing address MAY BE A POST			
	_		
	_		
D. If amending the registered agent an		in Florida, enter the name of the	
new registered agent and/or the nev	v registered office address:		
Name of New Registered Agent	Jo Lawrence		
	1630 Algonquin Dr		
	(Florida street a	ddress)	
N D 14 1000-143	Clearwater	, Florida 33755	j
New Registered Office Address:	(Cit)		ip Code)
	, ,	,	•
New Registered Agent's Signature, if c I hereby accept the appointment as regist		and accept the abligations of the position	n
nereoy accept the appointment as regist	егеа ахет. Тат јатина жип	and accept the congulations of the position	•••
~	1		
	1011910200		
	Simple Charles	tered Agent, if changing	
<i>(</i>)	signature oj New Kegis	tereu Agent, ij chunging	

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.

X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>		
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Carol H. Townsend	3292 MCMATH DR
Add			PALM HARBOR
x Remove			FL 34684
2) X Change	P	Cheryl Hurst	2681 LAKEBREEZE LANE N
Add			CLEARWATER
Remove			FL 33759
3) Change	IST VP	LAURIE HOSKING	464 SWALECLIFF CLOSE
Add			PALM HARBOR
X Remove			FL 34683
4) X Change	1ST VP	LEE HOOPER	2040 LAKEVIEW DR #205
Add			CLEARWATER
Remove			FL 33763
5) Change	RS	ROSEMARY FLEISHMAN	4759 PEBBLEBROOK DR
X Add			OLDSMAR
Remove			FL 34677
	PE	ADDIE SPICUZZA	2187 WATERSIDE DR
6) Change X			CLEARWATER
Add Remove			FL 33764
LCHIO1C			

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.

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Mike Jones, v as Kemove	, unu st	my smun	, sv us un A	uu.		
Example: X Change	<u>PT</u>	John D	<u>)0e</u>			
X Remove	<u>V</u>	Mike J	ones			
X Add	<u>sv</u>	Sally S	<u>Smith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s
1) Change	T		Pat	Arer	1a	2460 Northside Dr
Add Remove						# 1303 Cleanwater FL 33761
2) X Change	1		Jo	Lawre	na	1630 Algorquin Dr
Add	~ 4.5		<i>F</i> 10	ابلا د	W fc	FL 33155
3) Change Add	7 D	Ľ	<u>= [u</u>	ine Si	r Khotf	2457 Clubside Dr # 218
Remove No Ch	2000		Ann	Holloui	Miczki	Palm Harbor FL 34683
4)Change	<u></u>	<u>) </u>	1/111/	TOJOU	Millian y	oldsmar
Remove						FL 34617
5) Change		_				
Add Remove						
6) Change						
Add						
Remove						

Attach ac	ling or adding additional A dditional sheets, if necessary). (Be specific)				
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			, , , , , , , , , , , , , , , , , , ,			
		<u> </u>		· · · · · · · · · · · · · · · · · · ·		
			····			
provisio	endment provides for an expons for implementing the almost applicable, indicate N/A)	mendment if not	fication, or cand contained in the	ellation of issued : amendment itself	shares, <u>:</u>	
	,, ,,		<u> </u>			
				,		

The date of each amendment(s) adoption: (e-l-2014) date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 6-3-2016	
Signature QUELNCE	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
,	
Jo Cawrence	
(Typed or printed name of person signing)	
Tagswer	
(Title of person signing)	