N15000007543

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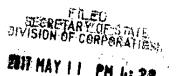
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Kiwanis of Dr. Ph	nillips Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Jennifer Schmitt	
	(Name of Contact Person)
The Orlando Law Group, PL	
	(Firm/ Company)
12301 Lake Underhill Road, Suite 213	
	(Address)
Orlando, Florida 32828	
	(City/ State and Zip Code)
jschmitt@theorlandolawgroup.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Jennifer Schmitt	407 512-4394 at
(Name of Contact Perso	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	\$\$\square\$\squa
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Kiwanis of Dr. Phillips Inc.

Kiwams of Dr. Finnips mc.		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
N15000007543		
	Number of Corporation (if I	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		
D. If amending the registered agent and/or registere		, enter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:		
		lorida street address)
New Registered Office Address:	,	oo naa sii eer aaaressy
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.		t the obligations of the position.
	Signature of New Regis	tered 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 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	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) X Change	P Dave Schmitt	12301 Lake Underhill Rd, Suite 241
Add		Orlando, FL 32828 US
Remove		
2) Change	P Pamela Martini	7625 W Sand Lake Rd, Suite 202
Add		Orlando, FL 32819 US
X Remove	S Maniago Mantin	12210 Leke Underkill D.A. Swite 241
3) Change	S Merissa Martin	12310 Lake Underhill Rd, Suite 241 Orlando, FL 32828 US
A Add Remove		
4) Change	T Laura H McNerney	8851 Conroy Windermere Rd
Add	-	Orlando, FL 32835
X Remove		
5) Change	VP Richard Reina	12310 Lake Underhill Rd. Suite 241
X Add		Orlando, FL 32835
Remove		
6) Change		
Add		
Remove		

If amending or adding additional A (attach additional sheets, if necessary)	rticles, enter cha	nge(s) here:			
(miach additional sheets, if hecessary)	. (De specific)				
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Th	e date of each amendment(s) adoption:	, if other than th
dat	e this document was signed.	
Eff	fective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records.	be listed as the
Ad	option 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 5/8/,7	
	Signature Dument	_
	(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)	
	Dave Schmitt	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	