N16000005172-

equestor's Name)	
ldress)	
ldress)	
ty/State/Zip/Phone	e #)
☐ WAIT	MAIL
usiness Entity Nar	me)
ocument Number)	
_ Certificates	s of Status
Filing Officer:	
	dress) by/State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates

Office Use Only



400286939154

400286939154 06/21/16-01030-024 **35.00

SECRETARY OF STATE

JUN 27 2016 C. CARROTHERS



Katie B. Benjamin kbenjamin@simseslaw.com

June 17, 2016

Via FedEx
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Friends of Recreation, Inc.

N16000005172

Dear Sir or Madam:

Please find enclosed for filing an amendment to the Articles of Incorporation of Friends of Recreation, Inc. In addition, please find enclosed a check in the amount of \$35.00 for purposes of this filing. Please return the acknowledgement of this filing to my attention at 251 Royal Palm Way, Suite 400, Palm Beach, Florida 33480. Please call me at (561) 835-1313 with any questions.

Sincerely,

Katie B. Benjamin

atil binjamin

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Friends of Recreation			
DOCUMENT NUMBER:	N16000005172			
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Kathleen Benjamin	·			
	(Name of Contact Po	erson)	
Simses & Associates, P.A.				
		(Firm/ Company	y)	
251 Royal Palm Way, Suite	400			
		(Address)		
Palm Beach, FL 33480				
	(City/ State and Zip	Code)	
kbenjamin@simseslaw.com				
E	-mail address: (to be used	for future annual rep	ort notification	1)
For further information conc	erning this matter, please c	all:		
Robert G. Simses		at	561	835-1313
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida l	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	3\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Moiling A	ddussa	C4		

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

Friends of Recreation, Inc.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
N16000005172	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
N/A	The new
name must be distinguishable and contain the word "corporal" "Company" or "Co." may not be used in the name.	
D. Enter new principal office address if applicables	N/A FO S
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 977
(muning unaress MAT BE A FOST OFFICE BOX)	Palm Beach, FL 33480
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: N/A	
New Barristana Coffee Address	(Florida street address)
New Registered Office Address:	
N/A	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the obligations of the position.
<u></u>	Signature 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 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>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>D</u>	Morton Mandel	1063 North Ocean Blvd.
Add			Palm Beach, FL 33480
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)				
N/A					
17/1			 	<u> </u>	
		·			
			•		

The date of each amendment date this document was signed	t(s) adoption:	ay 20, 2016	(or a	earlie	st dat	eailn	Nable)	_, if other	r than the
Effective date if applicable:	May 20, 2016	lorear								
	(no n	nore than 90) days after	r amendm	ent file do	ite)				
Note: If the date inserted in the document's effective date on the				atutory fil	ling requir	ements, th	is date wi	ill not b	e listed a	is the
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE))							
☐ The amendment(s) was/w was/were sufficient for ap		e members a	and the nu	mber of v	otes cast f	or the ame	ndment(s	3)		
There are no members or adopted by the board of o		to vote on th	he amendi	nent(s).]	The amend	lment(s) w	as/were			
June 1	16, 2016		//)						
Signature	Mire		Lui	le	•	· · · · · · · · · · · · · · · · · · ·	 		_	
have r	chairman or vice not been selected, court appointed fi	by an incorp	porator – i	f in the ha						
Mi	chael Ainslie									
		(Typed o	or printed i	name of p	erson sign	ing)				
Dii	rector (no Officers	s have been a	appointed))						
	·		(Title o	f person s	signing)		-			