N 16000006029

Office Use Only



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SECRETATION OF STATE

A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	UB OF LAKE NONA	LUNCH CLU	JB CORP
DOCUMENT NUMBER:	N16000006029			
The enclosed Articles of An	nendment and fee are sub	omitted for filing.		
Please return all corresponde	ence concerning this mat	ter to the following:		
	,	(Name of Contact P	erson)	
		(Firm/ Compan	y)	
		(Address)		· <u></u>
		(City/ State and Zip	Code)	
Е	-mail address: (to be use	d for future annual re	port notification	n)
or further information conc	erning this matter, please	e call:		
MAURITA BROWN		at	407	255-0287
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee icate of Status led Copy lional Copy is used)
Mailing Address Amendment Section		Street Address Amendment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED

THE ROTARY CLUB OF LAKE NONA LUNCH CLUB CORP

Name of Corporation as currently filed with the Flo	orida Dept. of State)	ZUZI AUG -9 PM 12: 48
N16000006029		SECOLYA ON OF CHARE
(Document	Number of Corporation (i	SECRETARY OF STATE TRINGING TALLAHASSEE, FL
Pursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorpora	ted" or the abbreviation "Corp." or "Inc."
3. 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	9	
, v <u> </u>		
). If amending the registered agent and/or registere	ed affice address in Flari	do enter the name of the
new registered agent and/or the new registered o		as, enter the name or the
Name of New Registered Ayent:		
New Registered Office Address:		(Florida street address)
		Florida
· · ·	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.		pt the obligations of the position.
	Signature of New Reg	istered 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 I V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>T</u>	AMY BENISON	13866 WALCOTT AVENUE ORLANDO, FL 32827
Remove			
2) <u>× Change</u> Add	<u>P</u>	MAURITA SUTTON-BROWN	11386 Biography War Orlando, Fr 32832
Remove 3) Change	VP	KRISTINA BUHL	11810 Imaginary Way
4) Change Add			
Remove			
5) Change Add			
Remove			-
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		ticles, enter change(s) here: (Be specific)	
	<u> </u>		

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The date of each amendmen	7/27/2021			, if other than the
date this document was signed				, a onici man tile
and and document was signed				
Effective date if applicable:	7/1/2021			
Enteuve date ii applicable:	bio more than 0	0 days after amendmer	nt file data)	
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Note: If the date inserted in the	tie block does not meet the a	policable statutoru fili-	na raquiramente this data	ill not he listed as the
document's effective date on t	he Department of State's rec	ords.	ng requirements, this date w	in not be fisted as the

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 7/27/2011
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)
Maurita Sutton-Brown (Typed or printed name of person signing)
(Typed of printed name of person signing)
(Title of person signing)