N16000006414

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	OWARD CENT	ENNIAL LIONS C	LUB, IN	C. 		
N16000 DOCUMENT NUMBER:	0006414					
The enclosed Articles of Amendme	nt and fee are sub	mitted for tiling.				
Please return all correspondence co	ncerning this mat	ter to the following:	:			
MS. LILIA GUTIERREZ						
		(Name of Contact	Person)			
BROWARD CENTENNIAL LION	S CLUB, INC.					
		(Firm/ Compa	ıny)			
6272 NW 186TH STREET APT 20	4					
		(Address)				
HIALEAH, FLORIDA 33015-6032						
		(City/ State and Z	ip Code)			
aliliagutierrez@hotmail.com						
E-mail a	Idress: (to be use	d for future annual	report no	lification	n)	
For further information concerning	this matter, pleas	e call:				
MS. LILIA GUTIERREZ			786		306-4936	
(Name	of Contact Person			Code)	(Daytime Telep	ohone Number)
Enclosed is a check for the followin	g amount made p	payable to the Florid	la Departi	ment of	State:	
□ \$35 Filing Fcc ■\$43. Cer	75 Filing Fee & difficate of Status	□\$43.75 Filing For Certified Copy (Additional copy enclosed)		Certifi Certifi	D) Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address		-	Street Ad			

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

FILED

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•	าเบา		\Г.I.	/ U.D.	IN ET.	131314	~ I	LIUNS	CLUD.	1134

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

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N16000006414			Short March
(Docun	ient Numb	per of Corporation (if known)	MILLAMASSEERI
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statut	es, this <i>Florida Not For Profi</i>	t Corporation adopts the following
A. If amending name, enter the new name of the	e corpora	tion:	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ttion" or "incorporated" or th	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble:	6272 NW 186TH ST APT 2	04
(Principal office address <u>MUST BE A STREET A</u>		HIALEAH, FLORIDA 3301	5-6032
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	LILIA GUTIERREZ	
	6272 NW 186TH ST APT 204		0.4
		HIALEAH, FLORIDA 330	15-6032
D. If amending the registered agent and/or registered agent and/or the new register			the name of the
Name of New Registered Agent:		UTIERREZ	
<u>Name of New Registerea Agent.</u>	6272 NW	7 186TH ST APT 204	
New Registered Office Address:			eet address)
	HIALEA	Н	, Florida 33015-6032
		(City)	(Zip Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen			ivations of the pasition
		Tilva (allawe ignature of New Registered M	· · · · · · · · · · · · · · · · · · ·
	/3	ignature of they negistered as	ieni, ij ununging

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 SV Sally	Jones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>×</u> Change Add	<u>PT</u>	ANGELICA CASTILLO	PEMBROKE PINES, FL 33026
Remove			
2) Change Add	<u>P</u>	LILIA GUTIERREZ	6272 NW 186TH ST APT 204 HIALEAH, FL 33015-6032
Remove	<u>v</u>	MATILDE RODRIGUEZ	DAVID, FLORIDA 33030
4) Change Add	<u>S</u>	ELIZABETH FIGUEROA	2201 S.OCEAN DRIVE APTO 903 HOLLYWOOD, FLORIDA 33019
Remove			
5) Change Add	<u>T</u>	LUZ ALZATE	PEMBROKE PINES, FL 33026
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		ticles, enter change(s) here: (Be specific)	
On July 19, 2022, Browa	rd Centennial Li	ons Club, Inc. meet to change the directories.	Please see attached letter signed by the
previous president Angel	ica Castillo leavi	ng the title of president-treasurer to the follo	wing new directives for the year 2022-1
President: Lilia Gutierrez	. Vicepresident:	Matilde Rodriguez, Secretaria: Elizabeth F	igueroa, Treasurer: Luz Alzate
Backup treasurer Felix F	igueroa.		

ful., 10, 202	
The date of each amendment(s) adoption: July 19, 202.	, if other than the
date this document was signed.	
Effective date if applicable: July 19, 2022	
(no more than 9	90 days after amendment file date)
<u>Note:</u> If the date inserted in this block does not meet the adocument's effective date on the Department of State's re	applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u>)

■ 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 7/19/2022
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)
LILIA GUTIERREZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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