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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ANCLOTE PIRATES INC. DOCUMENT NUMBER: <u>N160</u>00010851 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANDRES VILLAMARZO (Name of Contact Person) **DUNEDIN PIRATES** (Firm/ Company) 1602 GREENWOOD DRIVE (Address) **DUNEDIN, FL 34698** (City/ State and Zip Code) dunedinpirates@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at 727-379-2469 ANDRES VILLAMARZO (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address Ameriament Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahássee, FL 32314 Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2017

ANDRES VILLAMARZO DENEDIN PIRATES 1602 GREENWOOD DRIVE DUNEDIN, FL 34698

SUBJECT: ANCLOTE PIRATES, INC.

Ref. Number: N16000010851

We have received your document for ANCLOTE PIRATES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 517A00020050

Articles of Amendment Articles of Incorporation of

ANCLOTE PIRATES INC.

Atto	cles of Amendment	i
•	to	
Artic	des of Incorporation	20 Take
	of	7/2/2
ANCLO	OTE PIRATES INC.	
(Name of Corporation as curr	ently filed with the Florida De	pt. of State)
N	16000010851	pt. of State)
(Document Nur	mber of Corporation (if known)	
rsuant to the provisions of section 617,1006, Florida Stat mendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit	t Corporation adopts the following
. If amending name, enter the new name of the corpor	ation:	
DUNEDIN PII	RATES INC.	 The new
ime must be distinguishable and contain the word "corpo	oration" or "incorporated" or th	
Company" or "Co." may not be used in the name.		
. Enter new principal office address, if applicable:	1602 GREENWOOD	DRIVE
rincipal office address <u>MUST BE A STREET ADDRES</u>	OUNEDIN, FL 34698	
	DUNEDIN, FL 34030	
		l
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1602 GREENWOOD	DRIVE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1602 GREENWOOD DUNEDIN, FL 34698	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Mailing address MAY BE A POST OFFICE BOX)	DUNEDIN, FL 34698	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	DUNEDIN, FL 34698	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office.	DUNEDIN, FL 34698	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent: AND	DUNEDIN, FL 34698 office address in Florida, enter re address: RES VILLAMARZO	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent: AND	DUNEDIN, FL 34698 office address in Florida, enter re address: RES VILLAMARZO GREENWOOD DRIVE	the name of the
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address of each Offi Attach additional sh Please note the office P = President; V= Vi Executive Officer; CI held, President, Trea	cer and/or Director (eets, if necessary) orldirector title by the (ice President: T= TreeFO = Chief Financial surer, Director would	being added: first letter of the office title; asurer; S= Secretary; D= Director; TR= Officer, If an officer/director holds more be PTD.	rer/director being removed and title, name, and name, and title, name, and
a change, Mike Jone:	oted in the following i s leaves the corporation nove, and Sally Smith	m , Sally Smith is named the V and S . Thes	he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change.
Example: <u>X</u> Change <u>X</u> Remove <u>X</u> 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	BOARD	MICHAEL REHKOPF	1036 SOLAR DRIVE
Add			HOLIDAY, FL 34691
X Remove			
2) Change	PRESIDENT	ANDRES VILLAMARZO	1602 GREENWOOD DRIVE
_ X _ Add			DUNEDIN, FL 34698
Remove			
	CE P <u>RESID</u> ENT	STEVE KOROSSY	3007 92ND AVENUE E.
X Add			PARRISH, FL 34219
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Page 2 of 4

E. If amending or adding additional Articles, enter change(s), here: (witsch additional sheets, if necessary). (Be specific)	
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The date of each amendment(s) adopt	ion: UPON RECEIPT	if other than th
late this document was signed.		1
Effective date if applicable:	UPON RECEIPT	1
meetive date in appreasie.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not ment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	red by the members and the number of votes east for the amendment(s)	
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 10/28/2017		
	of VA	
Signature	n or vice chairman of the board, president or other officer-if directors	— l
have not been s	selected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	ANDRES VILLAMARZO	
	(Typed or printed name of person signing)	
	PRESIDENT	1
	(Title of person signing)	l l
	\$ 10 m 1 m 0 m	1