

N 17000000 341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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2017 MAY 15 AM 9:24  
DEPT. OF REVENUE  
TALLAHASSEE, FL 32310

Office Use Only



600299039496

05/16/17--01012--003 \*\*25.00

06/13/17--01015--001 \*\*10.00

17 JUN 12 PM 1:00

And

JUN 13 2017

R. WHITE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 18, 2017

RENEE ADAMS  
11835 LARKSONG LOOP  
RIVERVIEW, FL 33579

SUBJECT: KREWE OF SIR FRANCIS DRAKE, INC.  
Ref. Number: N17000000344

We have received your document for KREWE OF SIR FRANCIS DRAKE, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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.

Rebekah White  
Regulatory Specialist II

Letter Number: 317A00010038

RECEIVED

17 JUN -9 PM 1:34

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Krewe of Sir Francis Drake, Inc.

DOCUMENT NUMBER: N17000000344

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renee Adams  
(Name of Contact Person)

Krewe of Sir Francis Drake, Inc.  
(Firm/ Company)

11835 LARK SONG LOOP  
(Address)

Riverview FL 33579  
(City/ State and Zip Code)

Renee@prawayrecycling.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Renee Adams at 813 498-9186  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                        |                                                                                                     |                                                                                                                            |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

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

✓  
\$10.00  
PER letter

Articles of Amendment  
to  
Articles of Incorporation  
of

17 JUN 12 PM 1:00

Krewe of St. Francis Drake, Inc

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

N17 000000 344

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

11835 Lark Song Loop  
Riverview FL 33579

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

same

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Renee Adams

New Registered Office Address:

11835 LARK SONG LOOP

(Florida street address)

Riverview

(City)

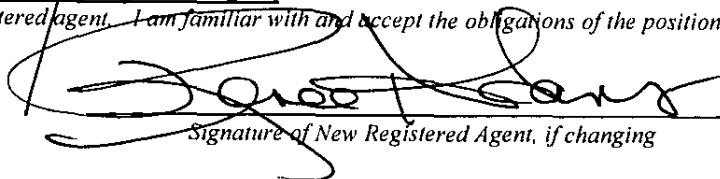
Florida

(Zip Code)

33579

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



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:

|                                            |           |                    |
|--------------------------------------------|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| Type of Action<br>(Check One)                                                                                    | Title                   | Name                    | Address                                                                 |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|-------------------------------------------------------------------------|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>T</u>                | <u>Luisa Reinhard</u>   | <u>837-A N Keen Rd</u><br><u>Clearwater Fl.</u><br><u>33755</u>         |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>Registered Agent</u> | <u>Terrill Reinhard</u> | <u>837-A N Keen Rd</u><br><u>Clearwater Fl</u><br><u>33755</u>          |
| 3) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>Mgr.</u>             | <u>Darren Stewart</u>   | <u>12205 Colonial Manor Pl.</u><br><u>Riverview Fl.</u><br><u>33579</u> |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____                   | _____                   | _____                                                                   |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____                   | _____                   | _____                                                                   |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____                   | _____                   | _____                                                                   |

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

Please Remove  
Terrill Reinhard  
as Registered Agent.

3rd time Submitting

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable:

May 1 2017 - Original Doc's  
(no more than 90 days after amendment file date) 4.20.17

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

June 7, 2017

Signature

Renee Adams  
(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)

Renee Adams

(Typed or printed name of person signing)

President.

(Title of person signing)