N170000 10938

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COVER LETTER

TO: Amendment Section Division of Corporations

HOBIE CLASS ASSOCIATION OF NORTH AMERICA, INC.
N17000010938
OCUMENT NUMBER:
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
RED WEIDIG
(Name of Contact Person)
HOBIE CLASS ASSOCIATION OF NORTH AMERICA, INC.
(Firm/ Company)
848 ROYAL OAK PLACE EAST
(Address)
DUNEDIN, FL 34698
(City/ State and Zip Code)
canatreasurer@gmail.com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
red Weidig 239 810-0703 at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
nclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of

HOBIE CLASS ASSOCIATION OF NORTH AMERICA, INC.

(Name of Corporation as on	irrently filed with the Florida Dept. of State)
N17000010938	relity filed with the Florida Dept. of State
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:
N/A	The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered	I office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
_	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	
	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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sm	nes es	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add		-		
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 Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

ARTICLE VII
DEDICATION OF ASSETS AND DISSOLUTION:
THE PROPERTIES AND ASSETS OF THE CORPORATION/ORGANIZATION ARE IRREVOCABLY DEDICATED
TO AND FOR NON-PROFIT PURPOSES ONLY. NO PART OF THE NET EARNINGS, PROPERTIES, OR ASSETS
OF THIS CORPORATION/ORGANIZATION, ON DISSOLUTION OR OTHERWISE, SHALL INURE TO THE
BENEFIT OF ANY PERSON OR ANY MEMBER, DIRECTOR, OR OFFICER OF THIS CORPORATION/
ORGANIZATION. ON LIQUIDATION OR DISSOLUTION, ALL REMAINING PROPERTIES AND ASSETS OF THE
CORPORATION/ORGANIZATION SHALL BE DISTRIBUTED AND PAID OVER TO AN ORGANIZATION
DEDICATED TO NON-PROFIT PURPOSES WHICH HAS ESTABLISHED ITS TAX-EXEMPT STATUS PURSUANT
TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OR CORRESPONDING SECTION OF ANY FUTURI
FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR TO A STATE OR
LOCAL GOVERNMENT FOR A PUBLIC PURPOSE. ANY SUCH ASSETS NOT DISPOSED OF SHALL BE
DISPOSED BY A COURT OF COMPETENT JURISDICTION IN THE COUNTY IN WHICH THE PRINCIPAL OFFICE
OF THE ORGANIZATION IS THEN LOCATED, EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH
ORGANIZATION OR ORGANIZATIONS, AS SAID COURTS SHALL DETERMINE, WHICH ARE ORGANIZED
AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.

April 15, 2019	, if other than the
The date of each amendment(s) adoption:	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed 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 amend was/were sufficient for approval.	ment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	/were
Dated May 5, 2019	
Signature // + WW	<u></u>
(By the chairman or vice chairman of the board, president or other officer-if di have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)	
FRED WEIDIG	
(Typed or printed name of person signing)	
SECRETARY AND TREASURER	
(Title of person signing)	