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PICK-UP WAIT MAIL
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(Document Number)
, ,
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October 24, 2018

JOHN CLARK RETIREMENT WORKSHOP 2020 1151 SW 30TH STREET, SUITE F PALM CITY, FL 34990

SUBJECT: RETIREMENT WORKSHOP 2020 CORPORATION

Ref. Number: N18000002668

We have received your document for RETIREMENT WORKSHOP 2020 CORPORATION 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.

Susan Tallent Regulatory Specialist II

Letter Number: 218A00021881

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FALLEAHASSES FL

## **COVER LETTER**

· TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Refire</u>	est Worsh	p 2028 Corp.
DOCUMENT NUMBER: N/801000	2668	
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this matt	er to the following:	
_Joh	n Clack (Name of Contact Person	
	(Name of Contact Person	1)
<u>Retieement</u>	Workston	P 2020
	(Firm/ Company)	
1151 SW 30	n St	F
	(Address)	
PALM	City Fa (City/ State and Zip Cod	34990
	(City/ State and Zip Cod	c)
C/ARE @ Re E-mail address: (to be used	HIREMET LA d for future annual report	Josephan Zoeo. Com
For further information concerning this matter, please		
John Clad	, at	5618182506
(Name of Contact Person	1) (A:	rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
835 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address Iment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curr		
Retingment Work	Shap 20200	N1800003266
(Document Nur	nber of Corporation (if known	Meration
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the corpor	ation:	
		The new
name must be distinguishable and contain the word "corport" ("Company" or "Co." may not be used in the name.	ration" or "incorporated" or	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		<del></del>
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>3</u> )	The second secon
		3_
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	·	
		**************************************
D. If amounting the reciptored arount and/or reciptored of	ffine addrage in Florida, onto	n the name of the
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		r the name of the
21 CAL D. 1.4		
Name of New Registered Agent:		
	(Cl., vi. I.,	street address)
New Registered Office Address:	(rioriau)	sa ee agaa essy
		121 a.u.) a.u.
<del></del>	(City)	, Florida (Zip Code)
		, , , , , , , , , , , , , , , , , , ,
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		bligations of the position
i nervay accept me appointment as registered agent. I am	jammar wan ana accept the tr	onganons of the position.
	Signature of New Registered	Avent if changing
	Digiminic of their registered	ngen, y 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 De           V         Mike Je           SV         Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		<del></del>	
Add			
Remove			
2) Change			
Add		<del></del>	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			
6) Change			
Add			
Remove			

purposes, including, i	for such purposes, th	ie making of distri	butions to organ	izations that qualify as	
exempt organizations	s described under Se	ection 501(c) (3) o	the Internal Re	venue Code, or	
corresponding sectio	on of any future federa	al tax code.	···		
Upon the dissolution	of the organization, a	assets shall be dis	stributed for one	or more exempt purpos	e
within the meaning o	f Section 501(c) (3) o	of the Internal Rev	enue Code, or o	corresponding section	
of any future federal	tax code, or shall be	distributed to the	federal governn	nent, or to a state or	
local government, for	r a public purpose. A	any such assets n	o disposed of sh	all be disposed of by a	
court of competent ju	urisdiction in the coun	ity in which the pr	incipal office of	the organization	
is then located, exclu	usively for such purpo	oses or to such or	ganization or or	ganizations, as	
said Court shall dete	ermine, which are orga	anized and opera	ted exclusively f	or such purposes.	<del></del>
			<del></del>		
xxxxxxxxxxxxxxxxxx	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	xxxxxxxxxxx	XXXXXXXXXXXXXXX	
		<del></del>			
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				<del></del>	

The date of each amendment(s) ado date this document was signed.	ption:	5, 2	2018		, if other than the
Effective date <u>if applicable</u> :	(no more than 90	days after	amandmant file	latal	
	(no more man 90	aays ajter (	<i>итепатені зне</i> (	iaie)	
<b>Note:</b> If the date inserted in this block document's effective date on the Department.			utory filing requ	irements, this date will no	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )				
☐ The amendment(s) was/were ado was/were sufficient for approval.		nd the num	ber of votes cast	for the amendment(s)	
There are no members or members adopted by the board of director		ie amendini	ent(s). The ame	ndment(s) was/were	
Dated	5, 2018	·			
Signature	Ru ( )	an			
have not been	nan or vice chairman of a selected, by an incorp prointed fiduciary by the	orator - if i	n the hands of a		
<del></del> .	John	C19	me of person sig	<del></del>	
	(1 yped o	i printed na	me of person sig	gning)	
	Owner	Y		<del></del>	
		(Title of	person signing)		