## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6380

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN WEST CENTRAL OFFICIALS ASSOCIATION INC.

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Corporate Filing Menu

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## COVER LETTER

TO: Amendment Section Division of Corporations						
WEST CENTRAL OFFICIALS ASSOCIATION INC.						
DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are subm	nitted for filing.					
Please return all correspondence concerning this matter	r to the following:					
Chaye	anne Moseley					
***************************************	(Name of Contact Person	)				
Legalz	coom.com, Inc.					
	(Firm/ Company)					
101 N. Brat	nd Blvd., 11th Floor					
	(Address)					
Glend:	ale, CA 91203					
	(City/ State and Zip Code	)				
iref_4fun@bellsouth.net						
E-mail address: (to be used	for future annual report n	outication)				
For further information concerning this matter, please	call:					
Cheyenne Moseley	800 at (	773-0888 ext. 9724				
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	E\$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				
Division of Corporations	Amendment Section Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahussec, Ff. 32314	2661 Executive Center Circle					

Tallahassee, FL 32301

## 2018-09-19 07 29 08 PDT

Articles of Amendment to Articles of Incorporation of

WEST CENTRAL OFFICIALS ASSOCIATION INC.

(Name of Corporation as currently filed with the Fig.	prida Dept. of State)
N1800	00009231
(Document Number of Co	orporation (if known)
ursuant to the provisions of section 617,1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
ame must be distinguishable and contain the word "corpora Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	11312 Labrador Duck Rd.
	) Weeki Wachee, FL 34614
C. Enter new mailing address if applicable: (Muiling address MAY BE A POST OFFICE BOX)	11312 Labrador Duck Rd.
	Weeki Wachee, FL 34614
If amending the registered agent and/or registered offi- pew registered agent and/or the new registered office a	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
(Clty)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	
Signature of New	Registered Agent, if changing
	No 1 -6 4

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2019 SEP 19 AM 8: 28

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 Doc 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.

X Change X Remove X Add	<u>V</u> <u>Mil</u>	n Doc se Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	PD	JOSPEH PAGE	11312 Labrador Duck Rd.
Add			Weeki Wachee, FL 34614
Remove			
2) Change	SD	MELODY JOHNSON	11312 Labrador Duck Rd.
Add			Weeki Wachee, FL 34614
Remove	_		
3) La Change	D	ANTHONY QUALITIERE	11312 Labrador Duck Rd.
Add			Weeki Wachee, FL 34614
Решоче			
4) Change	TD	JOSPEH WAJERSKI	11312 Labrador Duck Rd.
Add			Weeki Wachee, FL 34614
Remove			
5) Change	D	ROGER MAHARAJ	11312 Labrador Duck Rd.
Add	<u>-</u>		Weeki Wachee, FL 34614
Remove			
のChange			
Add		·—	
Кетюче		Page 2 of 4	

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The date of each ameridate this document was		option: 09/13/2018		if other than the
Effective date if appli	cable:	(no more than 90 days after amendi	ment file date)	<del></del>
		(mi more man 50 days after directal	·	
Adoption of Amendm	ent(s)	( <u>CHECK ONE</u> )		
The amendment(s was/were sufficient	•	opted by the members and the number of	votes east for the amendment(s)	
There are no men adopted by the be		ers entitled to vote on the amendment(s), rs.	The amendment(s) was/were	
Dated	_/45	ept2018		
Signature		man or vice extirmum of the board preside	unt or other officer-il directors	
	have not bee	n selected, by an incorporator - if in the h popointed fiduciary by that fiduciary)		
		Joseph Page		
<del></del>		(Typed or printed name of person signing)	)	
		President		
		(Title of person signing)		