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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HOLLY WED	D LIONS	CLUB	SCHOLARSHIP	INCE
DOCUMENT NUMBER: N 1 800 0 009 (594			- 2- 13
The enclosed Articles of Amendment and fee are suf-	omitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
TIM COLLINS				
	(Name of Contact	Person)		
HULLYWOOD LIONS CLUB				
	(Firm/ Compa	any)	•	
2415 WASHINGTON ST	···			
	(Address))		
HOLLYWOOD FL 33020			·	
	(City/ State and Z	ip Code)		
11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	IED 6) Car		* 44	
HOLLYWOODLIONS TREASUR E-mail address: (to be use	ed for future annual	report notific	C (Mation)	
For further information concerning this matter, please	e call:			
T1M		0011	2/47-/2/1/2	
TIM COLLINS (Name of Contact Perso		at 754	la) (Davidesa Talankana N	lh
(Name of Confact Ferso	111)	(Alea Co	ue) (Daytime Telephone N	(unitier)
Enclosed is a check for the following amount made p	payable to the Florid	la Departmen	t of State:	
☑ \$35 Filling Fee ☐ 543.75 Filling Fee &	. DSA 25 kating ti	a. 🗀 c	52.50 Filing Fee	
Certificate of Status			ertificate of Status	
	(Additional cop		ertified Copy	
	enclosed)		Additional Copy is	
		ŀ	Inclosed)	
Mailing Address		Street Addre	255	
Amendment Section		Amendment:		
Division of Corporations		Division of C		
P.O. Box 6327		Clifton Build		
Tallahassee, FL 32314			ve Center Circle	
		Tallahassee, I	FL 32301	

Articles of Amendment to Articles of Incorporation of

All	of	ı	
HOLLYWOOD LIONS CLUB S	ZUDI ARKUI	PTNC	india.
(Name of Corporation as cu	rrently filed with the	Florida Dept. of State)	
			Just Co
(Document N	umber of Corporation	(if known)	7
Pursuant to the provisions of section 617,1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this <i>Florida No</i>	ot For Profit Corporation ac	dopts the following
. If amending name, enter the new name of the corpo	oration:		
N/A			The new
N / A name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name.		rated" or the abbreviation '	"Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)		
2. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A		
2. If amending the registered agent and/or registered		rida, enter the name of the	
new registered agent and/or the new registered off Name of New Registered Agent: N/			
New Registered Office Address:		(Florida street address)	
		Florida	
	(City)	(Zip C	ode)
ew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I as	ered Agent: m familiar with and ac	cept the obligations of the p	Position.
	Signature of New R	Pegistered 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: XChange X Remove Add	$\frac{\underline{PT}}{\underline{\underline{V}}}$ $\underline{\underline{SV}}$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<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 Artic	les, enter change(s) here:
	(attach additional sheets	. if necessary).	(Be specific)

DISSOLUTION CLAUSE: UPON THE DISOLUTION OF THIS
ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE
OR MORE EXEMPT PURPOSES WITHIN THE MEANING
OF SECTION 501 (c)(3) OF THE INTERNAL REVENUE
COPE, OB CORRESPONDING SECTION OF ANY FUTURE
FEPERAL TAX CODE, OR SHALL BE DISTRIBUTED
TO THE FEDERAL GOVERNMENT, OR TO A STATE
OR LOCAL GOVERNMENT FOR A PUBLIC PURPOSE

The date t	date of each amendment(s) adoption: 10-15-19 this document was signed.	_, if other than the
Effec	ctive date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	21 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not bushed the date on the Department of State's records.	be listed as the
Adop	ption of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes east 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 <u>10 - 15 - 19</u>	
	Signature III	
	(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)	
	TIN COLLINS (Typed or printed name of person signing)	
	TREASURER (Title of person signing)	