N 1900005170

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone #	<i>‡</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
Special instructions to	Filing Officer	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	: Capital Cia	ar Club of	Tullaha	assee Inc
DOCUMENT NUMBER:	/1900000 3170			
The enclosed Articles of Amen	dment and fee are sub	mitted for filing.		
Please return all correspondence	ce concerning this matt	er to the following:		
Jeron Johnson	·			
		(Name of Contact Perso	on)	
Mienz. Consu	H/ng			
		(Firm/ Company)		
Mjenz: Consu 1028 & Park Tullahassce FC	Ave Iz	#4-	<u></u>	
T		(Address)		
Tullahassee FC	32301	(City/ State and Zip Coo		
		(City/ State and Zip Co	de)	
Farr	ail address: (to be use	d for future annual report	notification	1)
	·	·	. nonneunoi	•,
For further information concer	ning this matter, pleaso	e call:		
(A)	ame of Contact Persor	at	Cada)	(Daytime Telephone Number)
(N	ame of Contact Persor	i) (A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the foll	owing amount made p	ayable to the Florida Dep	partment of	State:
₹\$35 Filing Fee	343.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is esed)
Mailing Ado	<u>lress</u>	Stree	t Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

	rticles of Amendment	2 B
Ar	to ticles of Incorporation	
Capital Clab Capital Cig	of	Tallahussee Inc 3
(Document N	lumber of Corporation (if kr	помп)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	. ce 11. ' Fl:1-	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	i oince address in Fiorida, fice address:	enter the name of the
Name of New Registered Agent:		
Name of the weekstered rigen.		
New Registered Office Address:	(FI	orida street address)
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered agent. I a		the obligations of the position.
	Signature of New Registe	ered 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	PT John D V Mike Je SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u> </u>	chery 1 D Huynes	3030 Sa Monsce Street Tallohaske FC \$2301
X Remove			
2) Change Add	Sec_	Chennelle Haynes Harris	3030 5 Monroe Street Tullehussee FC 32301
X Remove	Transmer	Christin Danielle Haynes	3030 S Monrae Street Tallohossee FC 32301
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	

The date of each amendment(s) adoption: $05/15/2022$, if other than the
date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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 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 65/25/2022
	Signature How
	(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)
	Thomas Hagnes (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)