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## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2020

ELIZABETH PORTEUS 5313 PALEO PINES CIR FORT PIERCE, FL 34951

SUBJECT: LATIN AMERICAN MOTORCYCLE ASSOCIATION VERO BEACH

**CHAPTER INC** 

Ref. Number: N19000003961

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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 dall (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 020A00007389

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	•				
NAME OF CORPORATIO	Latin American Mo	otorcycle Associati	on Vero Beac	h Chapter Inc.	
l   DOCUMENT NUMBER:	N19000003961				
The enclosed Articles of Ame	endment and fee are sub	mitted for filing.			
Please return all corresponde	nce concerning this matte	er to the following:			
Elizabeth Porteus					
		(Name of Contact P	erson)		
		(Firm/ Company	y)		
5313 Paleo Pines Cir					
		(Address)		<u>.</u>	
Fort Pierce, FL 34951					
		(City/ State and Zip	Code)		
icecreamshopbiz@gmail.c	com				
Е-	mail address: (to be used	for future annual re	port notification	1)	
For further information conce	erning this matter, please	call:			
Elizabeth Porteus		at	301	573-3158	
(	Name of Contact Person	)	(Area Code)	(Daytime Telephone	Number)
Enclosed is a check for the fo	llowing amount made pa	yable to the Florida	Department of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	cate of Status ed Copy ional Copy is	
P.O. Box 6	nt Section Corporations	Ar Di Th	reet Address mendment Sectivision of Corpo ac Centre of T 15 N. Monroe	orations	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Latin American Motorcycle Association Vero Beach	h Chapter Inc	
(Name of Corporation as currently filed with the Flor	rida Dept. of State)	<del> </del>
N19000003961		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of the corp	poration:	
Smiley Riley's Foundation (IN)		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	)	2020 APR 15 PH 12:51
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		P11 12: 51
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	(Florida street address)	 
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regist land land land land land land land land	tered Agent: am familiar with and accept the obligations of the positi	n.
	Signature of New Registered Agent, if changing	<del></del>

• • • • • • • • • • • • • • • • • • •	•				
and address of each O (Attach additional shee	Officer and its, if neces	/or Director bei sary)	ing added:	ach officer/director being removed a	nd title, name,
	e Presideni ) = Chief I	i; T= Treasurer; Financial Officer	S= Secretary; D= Director.  If an officer/director hold	or; TR= Trustee; C = Chairman or Cl lds more than one title, list the first let	
	eaves the c	corporation, Sally	y Smith is named the V and	sted as the PST and Mike Jones is listed S. These should be noted as John Do	
Example:  X_Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>e</u>	<u>Addres</u> s	
1) Change Add	<u></u>	<u> </u>			
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4) Change Add	<u></u>				
Remove					
5) Change Add	<del></del>			···	
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6) Change Add					
E. If amending or add					
(attach additional sh	ieets, if neo	cessary). (Be s	pecific)		
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The date of each amendment(s) adoption: date this document was signed.	3/18/2020	, if other than the
Effective date if applicable: 3/18/2020		
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will tof State's records.	not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

There	re no members or members entitled to vote on the amendment(s). The amendment(s) was/were if by the board of directors.
•	3/18/2020 Dated
	Signature disphyl (1 Gostano)
	(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)
	Elizabeth Porteus
	(Typed or printed name of person signing)
	CEO .
	(Title of person signing)