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COVER LETTER

TO: Amendment Section Division of Corporations

D NAME OF CORPORATION: _	ESTINATION BROOKSVI	LLE, INC	
N1900 DOCUMENT NUMBER:	00008145		
The enclosed Articles of Amendm	ent and fee are submitted for	filing.	
Please return all correspondence co	oncerning this matter to the f	ollowing:	
LORI A SOWERS			
	(Name o	Contact Person)	
	(Firm	n/ Company)	
220 N BROAD ST			
	. (Address)	
BROOKSVILLE FL 34601			
	(City/ Sta	te and Zip Code)	
lori@lorisowerscpa.com			
E-mail:	address: (to be used for future	e annual report notifica	tion)
For further information concerning	this matter, please call:		
Lori A Sowers		352 at	797-0455
(Name	e of Contact Person)	(Area Cod	e) (Daytime Telephone Number)
Enclosed is a check for the followi	ng amount made payable to t	he Florida Department	of State:
	(Additi	ed Copy Ce onal copy is Ce ed) (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nclosed)
Mailing Addres Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion . orations		ection orporations if Tallahassee nroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

DESTINATION BROOKSVILLE, INC (Name of Corporation as currently filed with the Florida Dept. of State) N19000008145 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) Change Add					
Remove					
2) Change Add					
Remove 3) Change Add Remove					
4) Change Add					
Remove					
5) Change Add		<u>. </u>			
Remove					
6) Change Add					
Remove					
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
Adding ARTICLE IX			·		
The dissolution clause of	the corpo	eration shall be:			
Upon the dissolution of the	ne organiz	ration, assets shall be distributed for one or more e	xempt purposes within the meaning of		
Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be					
distributed to teh federal government, or to a state or local government, for a public purpose.					

	
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<u> </u>	
date this document was signed.	ndoption:, if other than
Effective date <u>if applicable</u> : July	/ 15, 2020
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.

	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 Signature Signature				
(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)					
	Lori A Sowers				
	(Typed or printed name of person signing)				
	Vice-President				
	(Title of person signing)				