

N19000010336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

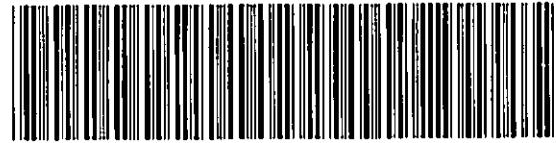
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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W23-93719

SC & Amend

A. RAMSEY
JUL 17 2023

JUL 12 2023

A. RAMSEY

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2023 JUL -5 PM 2:33

2023 JUL -7 PM 12:51

TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*00789, 01169, 00707, 00671

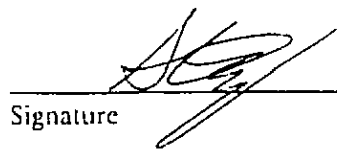
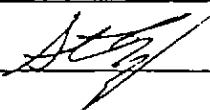
CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PUNISHERS BROWARD KNIGHTS LEMC, INC.

Please Debit FCA000000003 For: 35

Thank you Seth Neeley


Signature

Requested by: SETH

07/05/2023

Name

Date

Time

Walk-In

Will Pick Up

171 Pender's Printing • Tallahassee, FL 32301

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☒ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PUNISHERS Broward KNIGHTS LEMC Inc.
DOCUMENT NUMBER: N19000010336

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

J REGINE BRIGHT
Name of Contact Person

SKATE 200
Firm/ Company

135 SE 5TH AVE
Address

DADE COUNTY, FL 33482
City/ State and Zip Code

x franksanchez721@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J REGINE BRIGHT at (361) 573-8186
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|--|

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2023

CAPITAL CONNECTION, INC.

TALLAHASSEE, FL 32301

SUBJECT: PUNISHERS BROWARD KNIGHTS LEMC INC.
Ref. Number: N19000010336

We have received your document for PUNISHERS BROWARD KNIGHTS LEMC INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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 call (850) 245-6050.

Annette Ramsey
OPS

Letter Number: 923A00015011

RECEIVED

2023 JUL -7 PM 2:35

TALLAHASSEE, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

2023 JUL -7 PM 12 51

PUNISHERS BROWARD KNIGHTS LEMC, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N19000010336

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida non profit corp* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

all capitals letters

PUNISHERS LEMC - ACCOLADE, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Suite 200

135 SE 5th Ave

Delray Beach, FL 33483

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1005 Country Club Rd #408

Mayaguez, FL 33063

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

J. Renee Bright

Suite 200 135 SE 5th Ave

(Florida street address)

New Registered Office Address:

Delray Beach

(City)

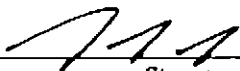
Florida

33483

(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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>P</u>	<u>FRANK SANCHEZ</u>	<u>1005 CORNING LANE DR</u> <u>4018 408</u> <u>MALDEN, MA 02148</u>
2) ____ Change ____ Add ____ Remove	____	____	____
3) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>VP</u>	<u>DARIO GINETTA</u>	<u>1171 HWY 35 ST</u> <u>4018 SPRING FI 2208</u>
4) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>Treas</u>	<u>Sheldon P. TILGNER</u>	<u>184 NW 13 ST</u> <u>5103</u> <u>DELICIA, BOSTON, MA 02115</u>
5) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>VP</u>	<u>FRANK SANCHEZ</u>	<u>1005 CORNING LANE DR</u> <u>4018 408</u> <u>MALDEN, MA 02148</u>
6) ____ Change ____ Add ____ Remove	____	____	____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Lined area for text entry.

The date of each amendment(s) adoption: 7/1/23, if other than the date this document was signed.

Effective date if applicable: 7/1/23
(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 7/6/23

Signature Frank Sanchez
(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)

FRANK SANCHEZ
(Typed or printed name of person signing)

President
Frank Sanchez President
(Title of person signing)