N190000 11096

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Y REPUBLICAN	CLUB, INC.			
N19000011096 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are subm	nitted for filing.				
Please return all correspondence concerning this matte	er to the following:				
MICHAEL THOMPSON					
Republican EAST LEE COUNTY EPUBLICAN CLUB, INC.	(Name of Contact	Person)		,	_
	(Firm/ Compa	ny)			
PO BOX 1076					
	(Address)			7.7	
ALVA, FLORIDA 33920				10 NOW	
	(City/ State and Zi	p Code)		5	
EASTLEEGOP@GMAIL.COM				PR	PY OF STATE
E-mail address: (to be used		eport notificati	on)	2: 06	FF AT
For further information concerning this matter, please	call:			3 7	JON:
MICHAEL THOMPSON	;	239 at	340-1685		37
(Name of Contact Person)		(Area Code)) (Daytime Telephone	e Number)	
Enclosed is a check for the following amount made page	yable to the Florida	a Department o	f State:		
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Cert / is Cert (Add	.50 Filing Fee ificate of Status ified Copy ditional Copy is losed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	[Street Address Amendment Sec Division of Cor Clifton Building	ction porations		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EAST LEE COUNTY REPUBLICAN CLUB, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N19000011096 (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: N/A (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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	BILLY WARE	2431 LIPPINCOTT ROAD
Add			ALVA, FLORIDA
X Remove			33920
2) Change	S	FORREST TAYLOR	307 WASHINGTON AVENUE
Add			LEHIGH ACRES, FLORIDA
X Remove			33936
3) Change	r	FORREST TAYLOR	307 WASHINGTON AVENUE
X Add			LEHIGH ACRES, FLORIDA
Remove			33936
4) Change	S	MARK WHITE	11900 GLEN AVENUE
X Add		-	FORT MYERS, FLORIDA
Remove			33905
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	

	NOVEMBER 5, 2019
	e date of each amendment(s) adoption:
Eff	ective date if applicable:
	(no more than 90 days after amendment file date)
_	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
Ad	option of Amendment(s) (<u>CHECK ONE</u>)
8	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 NOVEMBER 7, 2019
	Signature Illehal and any sant
	(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)
	MICHAEL THOMPSO
	(Typed or printed name of person signing)
	P
	(Title of person signing)
	(Title of person signing)