

N21000000820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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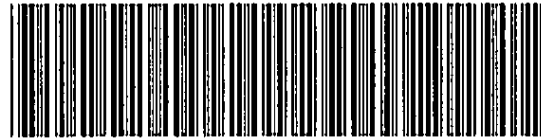
(Business Entity Name)

(Document Number)

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*Amend*

03/03/21--01006--025 \*\*43.75

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MAR 02 2021

2021 MAY 17 PM 12:13

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MAY 19 2021

A RAMSEY

\*00789, 01169, 00707, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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2021 MAY 17 PM 4:40

SECRETARY OF STATE  
TALLAHASSEE, FL

May 5, 2021

W. ED MOSS JR, CPA  
MOSS, KRUSICK & ASSOCIATES  
501 S. NEW YORK AVE, SUITE 100  
WINTER PARK, FL 32789

SUBJECT: WINTER PARK VOLLEYBALL CLUB FOUNDATION INC.  
Ref. Number: N21000000820

We have received your document for WINTER PARK VOLLEYBALL CLUB FOUNDATION INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6907.

Annette Ramsey  
OPS

Letter Number: 021A00009393

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: WINTER PARK VOLLEYBALL CLUB FOUNDATION INC.

DOCUMENT NUMBER: N21000000820

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

Please return all correspondence concerning this matter to the following:

W. Ed Moss, Jr., CPA

(Name of Contact Person)

Moss, Krusick & Associates, LLC

(Firm/ Company)

501 S. New York Avenue, Suite 100

(Address)

Winter Park, FL 32789

(City/ State and Zip Code)

shepherd@mosskrusick.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

W. Ed Moss, Jr., CPA

407

644-5811

at

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2021 MAY 17 PM 12:13

WINTER PARK VOLLEYBALL CLUB FOUNDATION INC.

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

N21000000820

(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

*The new 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.*

**B. Enter new principal office address, if applicable:**

N/A

(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:

W. Ed Moss, Jr., CPA

501 S. New York Ave., Suite 100

(Florida street address)

New Registered Office Address:

Winter Park


(City)

Florida 32789

(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

N/A

☒ 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 May 10, 2021

Signature Ed Moss  
(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)

W. Ed Moss, Jr., CPA

(Typed or printed name of person signing)

Registered Agent/CPA

(Title of person signing)