Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001877343)))



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Doing so will generate another cover sheet.

	To:			
		Division of Corporations		
PH L: 27	7	Fax Number : (850)617-6380		
7 H	From:	Account Name : UPCHURCH, BAILEY & UPCHURCH, P.A. Account Number : 075350000207	~;	
0		Phone : (904)829-9066		
iAY 1	**************************************	Fax Number : (904)825-4862		,
2021 HAY 10	Enter ann	the email address for this business entity to be used for future nual report mailings. Enter only one email address please.** 으로		ş
•		11 Address: Stansbacher Oubulaw. com] =	-
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COR AMND/RESTATE/CORRECT OR O/D RESIGN THE SUNSET ROTARY CLUB OF ST. AUGUSTINE, FLORIDA, IN

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

3111

COVER LETTER

TO: Amendment Section Division of Corporati	ions			
NAME OF CURPORAT	THE SUNSET RO	TARY CLUB OF ST	. AUGUSTINI	E, FLORIDA, INC.
DOCUMENT NUMBER	N21000003959			
The enclosed Articles of A	mendment and fee are au	bmitted for filing.		
Please return all correspon	dence concerning this ma	mer to the following:		
Sidney F. Ansbecher				
		(Name of Contact P	erson)	
Upchurch, Bailey and Upc	hurch, P.A.			
	····	(Firm/ Compan	y)	
780 N. Ponce de Leon Bou	levard			
		(Address)		
St. Augustine, Florida 3200	34			
		(City/ State and Zip	Code)	
sfansbacher@ubulaw.com				
	-mail address: (to be use	d for future annual rep	ort notification	n)
For further information con	cerning this matter, please	e call:		,
Cindy Strickland		at	(904)	829-9066
·····	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the t	following amount made p	ayable to the Florida I	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi (Addit	Filing Fee cate of Status ed Copy ional Copy is

Malling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahasacc, 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

Name of Corporation as currently filed with the Florida	Dept. of State)		
N21000003959			
(Document Num	ber of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not I</i>	For Profit Corporation adopts the follo	wing
A. If amending name, enter the new name of the corpora	tion:		
ROTARY OF ST. AUGUSTINE SUNSET, INC.			new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporat	ed" or the ab bre vlation "Corp." or "I	nc."
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS	D		,
			 ·
C. Enter new mailing address, if applicable:	N/A	•	
(Mailing address MAY BE A POST OFFICE BOX)	1074		
		<u></u>	, <u>+</u>
		<u> 구</u>	· (
			••
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office.	<u>tce address in Florid</u> address:	a, enter the name of the	
NJ/A			
Name of New Registered Agent:			
		Florida street address)	
New Registered Office Address:	'	, <u></u> ,	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature. If changing Registered is the appointment as registered agent. I am for	l Arenti miliar with and acce	pt the obligations of the position.	
	ionature of New Res	stered 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	PT John De Y Mike Ic SY Sally St	ones			
Type of Action (Check One)	Title	Name	Address		
1) Change Add					
Remove					
2) Change Add					
Remove 3) Change Add Remove					
4)Change					
Remove 5) Change Add					
Remove 6) Change Add					
E. If amending or adding additional Articles, enter change(s) hers: (anach additional sheets, if necessary). (Be specific)					
N/A					

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The date of each amendment	t(a) adoption:	AAY 4, 2021			if other than the
date this document was signed	APRIL 5, 2021				
Effective date if applicable:		re than 90 days aft	er amendment file	date)	
Note: If the date inserted in the document's effective date on the	iis block does not m	ect the applicable			e will not be listed as the
Adoption of Amendment(s)	(CHE	CK ONE)			
The amendment(s) was/w was/were sufficient for sp	vere adopted by the opproval.	members and the s	number of votes ca	at for the amendme	ent(s)

M	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	MAY 4, 2021 Dated				
	Signature Charles				
	(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)				
	(Typed or printed name of person signing)				
	(Title of person signing)				