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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

FIL-AM GOLF CLUNAME OF CORPORATION:	B JACKSONVILLE		ON	
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub-				
Please return all correspondence concerning this matter	er to the following:			
SALVADOR LIM				
	(Name of Contact Pe	rson)		
FIL-AMGOLF CLUB JACKSONVILLE CORPROA	TION			
	(Firm/ Company	)		
1105 ASHFIELD WAY				
	(Address)			
ST JOHNS, FL 32259				*\;
	(City/ State and Zip C	lode)		
BUDDYLIM@YAHOO.COM				; :.
E-mail address: (to be used	For future annual rep	ort notification	1)	
For further information concerning this matter, please	call:			,
SALAVDOR LIM	at	757	305-7730	
(Name of Contact Person	)	(Area Code)	(Daytime Telephone	Number)
Enclosed is a check for the following amount made pa	ayable to the Florida I	Department of	State:	
■ \$35 Filing Fee □S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Am Div Th 24	ect Address lendment Sect vision of Corp e Centre of T 15 N. Monro lahassee, FL 3	orations fallahassee e Street, Suite 810	

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) FIL-AM GOLF CLUB JACKSONVILLE CORPORATION (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: 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: (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 \_\_\_\_ (Zip Code) (City) 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>V</u> <u>Mik</u>	<u>1 Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>C</u>	ELSA P MILTON	546 CHESTWOOD CHASE DR ORANGE PARK, FL 32065
Remove 2) Change Add	<u>P</u>	RAYMOND LISING	1587 BAY HARBOR DR FLEMING ISLAND, FL 32003
X Remove 3) Change Add X Remove	<u>V</u>	BERNARD TATEL	907 NW ZACK DR 5- LAKE CITY FL32055 5
4) Change Add			
Remove  5) Change Add Remove		<u></u>	
6) Change Add Remove			
<del>.</del>		Articles, enter change(s) here: v). (Be specific)	

		<del></del>		
				<del></del>
	·			- 1
			<u> </u>	<u> </u>
				<u> </u>
The date of each amendment(s) adoption:date this document was signed.				, if other than the
Effective date <u>if applicable</u> :				
Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable starts records.	atory filing require	nents, this date will no	ot be listed as the
Adoption of Amendment(s) (CHECK	(ONE)			
☐ The amendment(s) was/were adopted by the me	mbers and the num	ber of votes east 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.
NOVEMBER 13, 2023 Dated
Signature Achairman or vice chairman of the board, president or other officer-if directors
(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)
SHLYADOR LIM
(Typed or printed name of person signing)
Registered Agent TS (Title of person signing)