# N2200000 8901

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Women's Croquet Association Inc. NAME OF CORPORATION: N22000008901 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cami Russack (Name of Contact Person) (Firm/ Company) 7999 N Federal Hwy STE 102 (Address) Boca Raton FL 33487 (City/ State and Zip Code) Cami@RLCFirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (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: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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

Enclosed)

(Additional Copy is

# Articles of Amendment to Articles of Incorporation of

Women's Croquet Association Inc.

(Name of Corporation as currently filed with the Flo	ride Dont of State)	
N22000008901	riua Dept. or State)	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
(Document	Number of Corporation (if known)	•
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profi	t Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
	···	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or th	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>	RESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	)	· -
D. If amending the registered agent and/or registere	d office address in Florida, enter	the name of the
new registered agent and/or the new registered o		
Name of New Registered Agent:		
	(Florida str	vet address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	tered Agent: am familiar with and accept the obl	igations of the position.
	Signature of New Registered As	vent. if changing

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	December 20, 2022			
The date of each amendment(s) adoption:	<del></del>			, if other than the
date this document was signed.				
Effective date if applicable:				
<u> </u>	o more than 90 days afte	er amendment fil	e date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Departmen	not meet the applicable : t of State's records	statutory filing re	equirements, this date	will not be listed as the
accument's effective date on the Departmen	e or state 8 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.

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 Do           V         Mike Jo           SV         Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change X Add	D	Cecelia   Battaglini	7909 N Federal Hwy STE 102 Boca Raton FL 33487
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet	g additional Arti (s, if necessary).	cles, enter change(s) here: (Be specific)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
December 20, 2022
Dated
Signature
(By the chairman of 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)
Dine et a
(Title of person signing)