5/14/25, 7:44 AM

Division of Corporations

## Florida Department of State Dissipations Distribution State The properties Cover Shear

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.

(((11250001755523)))



H2500017555234BC%

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Pax Number

: (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

<b>-</b> : 1	Address:			
-mail	UNALPOCC:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN BAY INDIES CHRISTMAS CLUB, INC.

THE CHAIN FILL FOR THE 16 WATER

Certificate of Status	()
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

TO:	Amendment Section
	Division of Corporations

BAY INDIES CHE	USTMAS CL	UB, INC.	
N23000011670			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for fili	ing,	
Please return all correspondence concerning this matt	ier to the follo	owing:	
E	rik Treutlein		
	(Name of Co	ontact Perso	n)
Legal	zoom.com, l	inc.	
	(Firm/ (	Company)	
11501 Do	omain Dr. Su	ite 200	
	(Ad	dress)	
Aus	tin, TX 7875	8	
	(City/ State a		c)#4/ 61 - 13201
१८७५५० स्टब्स्ट १५०० । kmoughler57@gmail.com		6,311, 31-	सम्बद्धाः स्टब्स्ट (स्टब्स्ट
E-mail address: (to be used		inual report	notification)
For further information concerning this matter, please	call;		
Erik Treutlein	at (	800	773-0888 ext. 9724
(Name of Contact Person)		(Arca Ca	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the I	Florida Depa	rtment of State:
\$35 Filing Fee  \$\Bigcit \text{S43.75 Filing Fee & Certificate of Status}	©\$43.75 Fil Certified C (Additional enclosed)	Copy Il copy is	Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 to 9 1000 Tallahassee, FL 32314	es. Pietricita	Amend Divisio Clifton	Address ment Section n'of Corporations Building xecutive Center Circle
	roden graat		ssee. FL 32301
1.1303	وردوه والرداد الردا	·	

2025 MAY 14 PH 3: 06

To:

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently file	d with the Florida Dept.	of State)	
N23000011670 .			
(Document	Number of Corporation (i	f known)	
ursuant to the provisions of section 617.1006, nendment(s) to its Articles of Incorporation:	Florida Statutes, this Flori	ida Not For Profit Corporati	on adopts the follow
. If amending name, enter the new name of	the corporation:		
			The /
ome must be distinguishable and contain the w Company" or "Co." may not be used in the n		corporated" or the abbrevial	ion "Corp." or "In
Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>			minimperson pagamatan kanadan kanadan kanada
			<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			
			<del></del>
If amending the registered agent and/or re	egistered office address in	Florids, enter the name of	
new registered agent and/or the new regis		A TOSTANO CONTRACTOR OF THE BASIS OF	
Name of New Registered Agent:		······································	
*******	(Florida street	addental	
New Registered Office Address:	(1 mans avec	ana essy	
<del></del>		, Florida	
	(City)		(Zıp Code)
ew Registered Agent's Signature, if changing ereby accept the appointment as registered as	i <mark>g Registered Agent:</mark> gent. I am familiar with a	nd accept the obligations of t	he position.

To:

LegelZoom.com, Inc.

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 Doc 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>M</u>	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
!)Change	P.D	Donna Fleharty	933 Montego W
Add Remove			VENICE, FL 34285
2) Change	Р	JACKSON, CHARLES	978 Sand Cay East
Add			VENICE, FL 34285
Remove  Change	D	Gloria Olson	452 Zacapa
X Add			VENICE, FL 34285
4) Change	D	Deanne Robinson	976 Xanadu E
X Add			VENICE, FL 34285
Remove		Constant	028 No W
7) Change Add	D	Gregory Schwartz	928 Nogoya W VENICE, FL 34285
Remove			
() Change	D	Jeannie House	930 Kenoma W
x Add			VENICE, FL 34285
Remove			

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>Tide</u>	<u>Name</u>	Address
7) Change	D	Lorenda Arcsnt	964 Xanadu E
× Add			VENICE, FL 34285
Remove			
8) Change			
Add			
Remove			
9) Change		<del></del>	
Add			
Remove			****
10 ) Change			•
Add			
Remove			
11 ) Change			
Add			
Remove			
<del></del>			
12 ) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)			
	- <del></del>	<del></del>		
	<del></del>			
	······································			
	_ <del></del>			
	·			
	<del> </del>	· · · · · · · · · · · · · · · · · · ·	•	
		<del></del>		
	÷		,	
	<u>-</u>			
<del></del>	<del></del> -			

To:

The date of each a		option: 4/7/2025	_, if other than the
Effective date if a	pplicable:	(no more than 90 days after amendment file date)	_
Adoption of Amen	dment(s)	(CHECK ONE)	
	nt(s) was/were ad cient for approva	opted by the members and the number of votes east for the amendment(s)	
	nembers or members board of directo	pers entitled to vote on the amendment(s). The amendment(s) was/were ers.	
Dated	1/-	1/2025 + Marco 11	
Signą	(By the chilin	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	_
K	KEITH MOUGHL	LER	
_		(Typed or printed name of person signing)	
Đ	Director		
_		Clitle of person signing)	

2025 HAY ILL PH 3: 06