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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION:	nds of Kweshan State Park Inc
	,
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
	im Murphy
	(Name of Contact Person)
Friends	of Koreshan State Park (Firm Company)
	(Firm/ Company)
3800	Corkscrew Road
	1 (Tittel Coop)
Ester	7, FL 33928
	(City! State and Zip Code)
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Tim Murahy	570 815-2715
(Name of Contact Perso	at 570 815 - 3715 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

Figends of Koreshan	State Park, Inc.
(Name of Corporation as currently filed with the Florida I.	lept. of State)
(Davingary Vianh	er of Corporation (if known)
(Document Number	егол Согрованов (и кноwn)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
	The new
name must be distinguishable and contain the word "corporat" Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp" or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	,
	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	P: 1:
	·· •
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a	
	Tim Murphy
Name of New Registered Agent:	1 / .
	3800 Corkscrew Road (Florida street address)
New Registered Office Address:	ii wani sieti adottsi
	Estero Florida 33928
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent
Thereby accept the appointment as registered agent. I am far	
	musply
Si_{ξ}	gnature of New Registered Alent, it changing
	\bigcup

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 V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add	<u> </u>	Tim Murphy	3300 Contisciented Estero FL 33928
Remove 2) Change Add	<u></u>	Stephen Levin	3800 Corkson: Ad Estew FL 33928
Remove Change Add Remove	<u>S</u>	Marianne Suffern	3800 Corkscrev Rd Estero FL 33921
4) Change Add	<u> </u>	Tamitha Chavez	3800 Coikscrow Rd Estera FL 33928
Remove Change Add			
Remove 61ChangeAdd			
Remove E. If amending or additional sheet		cles, enter change(s) here: - (Be specific)	
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1,564					
					
				, ,	
The date of each amendment(s) adopt	ion:				, if other than the
date this document was signed.					
Effective date <u>if applicable</u> :					
паррилари.	(no more than 4	0 days atter um	endment file da	te)	
Note: If the date inserted in this block d	loes not meet the a	pplicable statut	ory filing requir	rements, this dat	e will not be listed as the

The amendment(s) was were adopted by the members and the number of votes cast for the amendment(s) was were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

=	are no members or members entitled to vote on the amendment(s). The amendment(s) was were d by the board of directors.
	Dated
	Signature Muso Ly
	(By the chairman or vice chairman of the loard, 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 fhat fiduciary)
	TIMOTHY MUYONY (Typed or printed name of person signing)
	(Title of person signing)