N24000004009

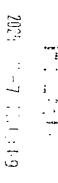
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	RICAN CLUB OF CENTRAL FL INC
N24000004009 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this	matter to the following:
SAUL VELEZ	
	(Name of Contact Person)
B AND P CONSULTANTS SERVICES INC	
	(Firm/ Company)
3501 W VINE ST STE 316	
	(Address)
KISSIMMEE, FL 34741	
	(City/ State and Zip Code)
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	case call:
SAUL VELEZ	407 8461040 at
(Name of Contact Pe	rson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	

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

Articles of Amendment Articles of Incorporation of



	Articles of Incorporation	
	of	
ITALIAN AMERICAN CLUB OF CENTRAL F		
Name of Corporation as currently filed with t	he Florida Dept. of State)	223 7 111 h: 4
N24000004009		
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Flumendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not For Pro</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the	he corporation:	
		The new
name must be distinguishable and contain the wor		the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the nan	<u>ne</u> .	
B. Enter new principal office address, if applic		
Principal office address MUST BE A STREET	<u>ADDRESS</u>)	
C. Enter now mailing address if applicables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
	·	
N. I.E I		
 If amending the registered agent and/or registered agent and/or the new registered. 		r the name of the
	NUNZIANTE R RINALDO	
Name of New Registered Agent:		
	13016 BAYBROOK LN	
Van Davietana I Affian Allen		street address)
New Registered Office Addres.		24711
	CLERMONT	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:	
hereby accept the appointment as registered ago		bligations of the position
	Musik #	
	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	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Doe Mike Jone Sally Smi		
Type of Action (Check One)	<u>Title</u>	<u> 2</u>	<u>Same</u>	Address
1) × Change Add	<u> </u>			13016 BAYBROOK LANE CLERMONT FL 34711
Remove			-	
2) Change Add				
Remove 3) Change Add Remove			, <u>-</u> -	
4) Change Add		- -		
Remove 5) Change Add Remove				
6) Change Add				
E. If amending or addin (attach additional shee				

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	F-10-10-10-10-10-10-10-10-10-10-10-10-10-	
		
	(11/22/2024	
The date of each amendment(s) adoption: date this document was signed.	04/23/2024	_, if other than the
Effective date if applicable: 03/27/2024		
(n	o more than 90 days after amendment file date)	
	not meet the applicable statutory filing requirements, this date will not	ne listed as the

(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.

Adoption of Amendment(s)

	opted by the board of directors.
	04/23/2024 Dated
Sig	Signature Action of the 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)
	NUNZIANTE R RINALDO
	(Typed or printed name of person signing)
	PRESIDENT