

N 43274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

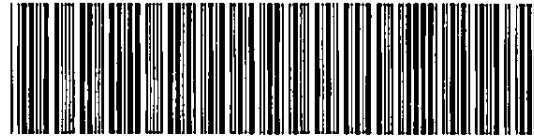
(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only

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07/13/17--01013--029 **35.00

FILED
2017 SEP 28 PM 3:43
CLERK OF COURT

C. GOLDEN

SEP 28 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL FLORIDA

DOCUMENT NUMBER: N 43276

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICK GROUNDS

(Name of Contact Person)

BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL FLORIDA

(Firm/ Company)

813 PALMSIDE POINTE BLVD

(Address)

APOLKA FL 32712

(City/ State and Zip Code)

BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL FLORIDA@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICK GROUNDS

(Name of Contact Person)

at 845 406-7489

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

ALREADY PAID

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2017

NICK GROUNDS 2ND MAILING
813 PARKSIDE POINTE BOULEVARD
APOPKA, FL 32712

SUBJECT: BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL
FLORIDA, INCORPORATED
Ref. Number: N43276

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You cannot submit a profit corporation form for a non-profit corporation.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 717A00017180

RECEIVED
17 SEP 28 AM 11:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2017

NICK GROUNDS
813 PARKSIDE POINTE BOULEVARD

SUBJECT: BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL
FLORIDA, INCORPORATED
Ref. Number: N43276

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 717A00017180

RECEIVED
7 SEP 13 AM 9:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2017

NICK GROUNDS
813 PARKSIDE POINTE BLVD.
APOPKA, FL 32712

SUBJECT: BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL
FLORIDA, INCORPORATED
Ref. Number: N43276

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 917A00014447

RECEIVED
17 AUG 14 PM 4:10
BUREAU OF CORPORATE
INFORMATION SERVICES

Articles of Amendment
to
Articles of Incorporation
of

BRITISH AMERICAN CHAMBER OF COMMERCE OF CENTRAL FLORIDA, INCORPORATED

(Name of Corporation as currently filed with the Florida Dept. of State)

N43276

(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:

The new 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)

813 Parkside Pointe Blvd

Apopka,

Florida 32712

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

813 Parkside Pointe Blvd

Apopka

Florida, 32712

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:

Nick Grounds

813 Parkside Pointe Blvd,

(Florida street address)

New Registered Office Address:

Apopka

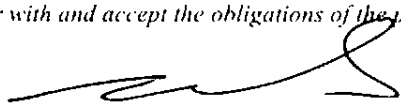
(City)

Florida 32712

(Zip Code)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>TIM BOON</u>	<u>4700 NILLEENIA BLVD</u> <u>ORLANDO FL 32379</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>CHRISTINE WILLIAMS</u>	<u>AS ABOVE</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>TODD BARDWIN</u>	<u>AS ABOVE</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>LAURA HALFPENNY</u>	<u>AS ABOVE</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>NICK GROUND</u>	<u>813 PARCIDE-POINTE BLVD</u> <u>ALOPKA FL 32712</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>RATIN ASCAR</u>	<u>AS ABOVE</u>

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's 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.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 9-21-17

Signature 

(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)

NICK GROUND
(Typed or printed name of person signing)

PRESIDENT.
(Title of person signing)