N 51221

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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MAR 2 9 2019 S. YOUNG



March 21, 2019

STEVEN E SCHADT 2004 E 114TH AVENUE TAMPA, FL 33612

SUBJECT: RANCH HANDS SERTOMA CLUB, INC.

Ref. Number: N51221

We have received your document for RANCH HANDS SERTOMA CLUB, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ALL PAGES MUST BE MAILED. ONLY PAGE 2 RECEIVED

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The name and title of the person signing the document must be noted beneath or opposite the signature.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Shelia H Young Regulatory Specialist II

28 PM 1: 1 HASSEE FL

www.sunbiz.org

Letter Number: 519A00005642

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Ranch</u>	-lands Sertoma Club, Inc.			
DOCUMENT NUMBER: <u>N5 27</u>				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
<u>Steven</u>	E. Schadt Name of Contact Person			
	Firm/ Company			
2004 E. 114th Ave.				
Tampa	FL, 33612 City/ State and Zip Code			
gatorsteve Smail address: (to be us	547.3 @ Yahoo.com sed for future annual report notification)			
or further information concerning this matter, pleas	se call:			
	ar (813) 971 - 1623			
Name of Contact Person	Area Code & Daytime Telephone Number			
inclosed is a check for the following amount made i	payable to the Florida Department of State:			
S35 Filing Fee S43.75 Filing Fee Securificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RANCH HANDS SERTOMA CLUB, INC.

(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)		41.1
N51221				
(Document Nun	ber of Corporation (if kno	wn)		
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For I</i>	Profit Corporation ado	pts the fo	ollowing
A. If amending name, enter the new name of the corpora	ition:			
				The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated"	or the abbreviation "C	orp." or	"Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>)	<u> </u>			
			<u> </u>	19
			<u> </u>	
C. Enter new mailing address, if applicable:			7. T	3 5
(Mailing address MAY BE A POST OFFICE BOX)			,	<u> </u>
			: ::	2
			ON :	-:-
			<u></u>	Ö
D. If amending the registered agent and/or registered of		nter the name of the		
new registered agent and/or the new registered office	address:			
Name of New Registered Agent:				
	/Flor	da struct address)		
New Registered Office Address:	74 11/1	an invertible con		
		, Florida		
	(City)	(Zip Co	de)	
New Registered Agent's Signature, if changing Registere				
hereby accept the appointment as registered agent. I am	familiar with and accept th	e obligations of the po	sition.	
	Signature of New Register	ed Agent Webanaina		_ -
	againme of new register	co rigera, y enanging		

If amending the Officer address of each Officer	s and/or and/or D	Directors, enter the title and name of each officer/di	rector being removed and title, name, and
(Attach additional sheets, Please note the officer/di P = President: V= Vice Executive Officer: CFO held, President, Treasure	, if necess rector titl President = Chief i rr, Directo	sary) le by the first letter of the office title: t: T= Treasurer: S= Secretary: D= Director: TR= Tru Financial Officer. If an officer/director holds more the or would be PTD.	ST and Mike Jones is listed as the V. There is
a change, Mike Jones led Mike Jones, V as Remove	aves the c	corporation, Sally Smith is named the v and 5. These sh	nould be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) K Change	P	Steven E. Schadt	2004 E. 114th Ave.
Add			Tampa, FL. 33612
Remove			
2) Change	 -		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
) Change			
Add			
Remove			
Change			
Add			
Remove			

Mach additional si	heets, if necessary). ((Be specific)			
					
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The date	of each amendment(s) a	doption:	3-25-19	, if other than the
date this c	locument was signed.			
Effective	date if applicable:		3-26-19	
		(no more than	190 days after amendment file do	ate)
	the date inserted in this blo 's effective date on the De			rements, this date will not be listed as the
Adoption	of Amendment(s)	(<u>CHECK O</u>	NE)	
	amendment(s) was/were a were sufficient for approv		ers and the number of votes east t	for the amendment(s)
	re are no members or mem nted by the board of direct		on the amendment(s). The amend	dmem(s) was/were
	Dated	3-25-19		
	Signature (Dayler)	1th-1	1	Section 1970
	have not be		n of the board, president or other corporator – if in the hands of a r by that fiduciary)	
		<u>Steven</u>	E. Schadt ed or printed name of person sign	ning)
		<u> </u>	Cesident (Title of person signing)	