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(Ac	idress)	
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COVER LETTER

TO: Amendment Section : Division of Corporations

NAME OF CORPORATION	GFWC Miami Sprin ON:	gs Woman's Club			
DOCUMENT NUMBER:	N93000000102				
The enclosed Articles of Am	endment and fee are sub-	mitted for filing.			
Please return all corresponde		_			
Nancy Davis	_	·			
		(Name of Contact)	Person))	
Miami Springs Woman's Clo	ub				
		(Firm/ Compa	ny)		
PO Box 660396					
		(Address)			
Miami Springs, FL 33266					
		(City/ State and Zip	p Code)	
MSWOClub@gmail.com					
Е	-mail address: (to be used	for future annual re	eport n	otification)
For further information conc	erning this matter, please	call;			
Nancy Davis		,	305 at		803-6875
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	ayable to the Florida	ı Depai	rtment of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fed Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	<u>s</u>	<u>trect A</u>	ddress	

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GFWC Miami Sprin	gs Woman's Club
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(Name of Corporation as currently filed with th	e Florida Dept. of State)	
(Docur	nent Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	d "corporation" or "incorporat e.	The new ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	able:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	
D. If amending the registered agent and/or reginew registered agent and/or the new register	stered office address in Florid	a, enter the name of the
Name of New Registered Agent:	Nancy Davis	·
	1221 Swan Avenue	
New Registered Office Address:	(.	Florida street address)
	Miami Springs	, Florida ³³¹⁶⁶
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with and accep	ot the obligations of the position.
-	Haney o	Stevels stered Agent, if changing
	V	. *

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 Do V Mike Jo SV Sally Sr	ones .	
Type of Action (Check One)	Title	Name	Address
1) <u>* Change</u> Add	<u>T</u>	Nancy Davis	1221 Swan Avenue Miami Springs, FL 33166
Remove			
2) <u>*</u> Change Add	<u>1st VP</u>	Maibelys (Milly) Perez-Crespo	501 Curtis Parkway Miami Springs, FL 33166
Remove 3) A Change Add Remove	2nd VP	Inga (Cookie) Lange	1151 Plover Avenue Miami Springs, FL 33166
4) × Change Add	<u>CS</u>	Elizabeth Rivera-Blanco	1084 Raven Avenue Miami Springs, FL 33166
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional sheet	g additional Artic ts. if necessary).	cles, enter change(s) here: (Be specific)	
			
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The date of each amendment(s) adoption	n: May 31, 2024				
The date of each amendment(s) adoption date this document was signed.				, if other	than the
in applicable.					
	(no more than 90 days	after amendment fl	ile date)		
Note: If the date inscrted in this block doe document's effective date on the Departme	s not meet the applicab	le statutory filing t	equirements, this	s date will not be listed a	s the
document's effective date on the Departme	ent of State's records.	-		oo mateu a	
Adoption of Amendment(s)	CHECK ONES				
	(CHECK ONE)				

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

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
April 16, 2024 Dated
Signature Eden McDonough
(By the chairman or vice chairman of the board, gresident 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)
Eileen McDonough
(Typed or printed name of person signing)
PResident
(Title of person signing)