

N93 00000 2600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

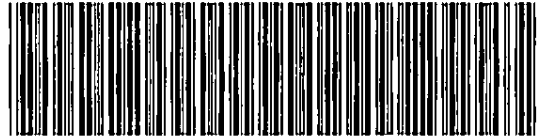
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FILED  
2022 JUN -8 AM 6:51  
SECRETARY OF STATE  
TALLAHASSEE, FL

A. BUTLER

JUL 18 2022

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FLAMINGO BINGO INC.

DOCUMENT NUMBER: 193000002600

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

Please return all correspondence concerning this matter to the following:

VIRGINIA KEVORKIAN  
(Name of Contact Person)

FLAMINGO BINGO INC.  
(Firm/ Company)

1651 SW. 127<sup>th</sup> AVE. A 401  
(Address)

PEMBROKE PILES FL 33027  
(City/ State and Zip Code)

Ginny787@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VIRGINIA KEVORKIAN at 305-954-4351  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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

<input type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
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**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  
to  
Articles of Incorporation  
of

FILED

2022 JUN -8 AM 6:51

SECRETARY OF STATE  
TALLAHASSEE, FL

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

193000002600  
(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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

(Florida street address)

New Registered Office Address:

\_\_\_\_\_  
\_\_\_\_\_, Florida  
(City) (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	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- |   |      |                |  |
|---|------|----------------|--|
| 1) <input checked="" type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | VP   | NORA FREATIS   | 13800 SW 5 <sup>th</sup> CA<br>M310<br>Pembroke Pines, FL 33027  |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove            | V.P. | MONICA GODDARD | 650 SW 138 <sup>th</sup> AVE<br>J202<br>Pembroke Pines, FL 33027 |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       |      |                |  |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       |      |                |  |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       |      |                |  |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       |      |                |  |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

NONE

The date of each amendment(s) adoption: 6-11-22, if other than the date this document was signed.

Effective date if applicable: 6-30-22  
(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 06-11-2022

Signature Virginia Kevoorkian  
(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)

VIRGINIA KEVOORKIAN  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

~~No amendments added~~ V-K

RECEIVED

2022 JUL -8 PM 12:22



SECRETARY OF STATE  
TALLAHASSEE, FL  
FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 23, 2022

VIRGINIA KEVORKIAN  
1651 SW 127TH AVE  
A401  
PEMBROKE PINES, FL 33027

SUBJECT: FLAMINGO BINGO, INC.  
Ref. Number: N93000002600

We have received your document for FLAMINGO BINGO, 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):

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

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.

Anissa Butler  
Regulatory Specialist II

Letter Number: 322A00014132



RECEIVED

2022 JUN 17 AM 8:10

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FL

June 7, 2022

VIRGINIA KEVORKIAN  
1651 SW 127 AVE  
APT A 401  
PEMBROKE PINES, FL 33027

SUBJECT: FLAMINGO BINGO, INC.  
Ref. Number: N93000002600

We have received your document for FLAMINGO BINGO, 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):

YOU HAVE MISSING PAGES TO YOUR DOCUMENT. PLEASE COMPLETE THE ATTACH NONPROFIT AMENDMENT FORM.

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.

Anissa Butler  
Regulatory Specialist II

Letter Number: 322A00012738