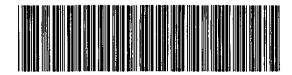
196000001942

(Re	equestor's Name)	
(Ad	ldress)	
V	······	
(Ac	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Ви	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300292679833

12/06/18--01018--028 **35.00

SECRETARY OF STATE

DEC 08 2016



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		WAMP FESTIVAL, IN	IC.	
DOCUMENT NUMBER:	N96000001942			
The enclosed Articles of An	nendment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
		GREG K. MYERS		
	(Name of Contact Perso	n)	
	MYERS	BUSINESS SERVICE	ES, INC.	
		(Firm/ Company)		
		P.O. BOX 10189		
		(Address)		-
	BRO	OKSVILLE, FL 34603-	-0189	
	(City/ State and Zip Cod	le)	
	N	1BSINC1979@aol.com	ı	
E	-mail address: (to be used	for future annual report	notification	1)
For further information conc	erning this matter, please o	all:		
	GREG K. MYERS	at	(352)	544-0024
	(Name of Contact Person)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida Dep	artment of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & L Certificate of Status	1\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing Address		Street Address		
Amendme	Amendment Section			
Division o	Division of Corporations Clifton Building			
P.O. Box (Tallahasse			enter Circle	
i ananasse	··, · · · · · · · · · · · · · · · · · ·	20011	SACCULIAC C	Citter Circle

Tallahassee, FL 32301

اً

Articles of Amendment to Articles of Incorporation of

WEEKI WACHEE SWAMP FESTIVAL INC

Janes 1		

** LL	KI WACIIL	E SWAME TEST	I VAL, IIV			
(Name of Corporation	as current	tly filed with the l	Florida D	ept. of State)		
	N	96000001942		2016 DEC -6	, 🗅 3: 46	O
(Docum	ment Numbe	er of Corporation ((if known)		40	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not</i>	For Prof	SECRETARY A CLABBARSA	gorrusion The State	wing
A. If amending name, enter the new name of th	e corporati	on:			•	
N/A					TI	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorpor	ated" or t	he abbreviation		e new Inc."
B. Enter new principal office address, if applica	ible:	N/A				
(Principal office address MUST BE A STREET A						
		•				
·				<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	N/A				
	2011/					
D. If amending the registered agent and/or regi	stered offic	e address in Flori	ida. enter	the name of th	e	
new registered agent and/or the new register					_	
Name of New Registered Agent:	MYERS E	BUSINESS SERVI	ICES, INC	2.		
	624 Decat	ur Avenue				
			(Florida st	reet address)		
<u>New Registered Office Address</u> :						
	Brooksvill	le		, Florid	34601-3236 a	,
		(City)		(Zip	Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			cept the ob	ligations of the	position.	
				>_		
<u>-</u>			<u> </u>			<u></u>
	Si	gnature of New Re	gistered A	gent, if Changii	1g	
				~		

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	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	<u>N/A</u>	N/A	N/A
Add			
2) Change	N/A	N/A	N/A
Add Remove			· · ·
3) Change	N/A	N/A	N/A
Add Remove			
4) Change	N/A	N/A	N/A
Add			
Remove	N/A	N/A	N/A
5) Change Add			
Remove			
6) Change	N/A	N/A	N/A
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
AMEND: ARTICLE III - PURPOSE: The specific purpose for which the Corporation is organized is exclusively for
religious, charitable, educational and scientific purposes under Section 501(c)(3) of the Internal Revenue Code, or
corresponding section of any future Federal Tax Code. To serve the needs of the community by organizing and hosting an
annual fundraising event known as the "Weeki Wachee Swamp Fest" for the benefit of granting operational funds to
other community based organizations.
ADD: ARTICLE VIII - DISSOLUTION: Upon the dissolution of this organization, assets shall be distributed for one or
more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of
any future Federal Tax Code, or shall be distributed to the Federal Government, or to a State or Local Government, for a
public purpose.

	ate of each amendment(his document was signed.	s) adoption:	_, if other than the
	•	N/A	•
		(no more than 90 days after amendment file date)	
		s block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the
Adop	tion of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
	There are no members or nadopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Dated	12/1/2016	
	Signature	Ida Canariato	_
	have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or burt appointed fiduciary by that fiduciary)	
		IDA CANNARIATO	
		(Typed or printed name of person signing)	
		SECRETARY	
		(Title of person signing)	