

N96000002464

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name change

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Pasco County Mounted Posse, Inc.

DOCUMENT NUMBER: N 96 00000 2464

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

Please return all correspondence concerning this matter to the following:

Karen A. Michalak
(Name of Contact Person)

Pasco County mounted Posse, Inc.
(Firm/ Company)

18828 Floratton Dr.
(Address)

Spring Hill, FL 34610
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Karen A. Michalak at (727) 514 5443
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
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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
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA
Ince

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

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: 4/12/05

Effective date if applicable: 5/10/05
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 12th day of April, 2005

Signature Karen A. Michalak
(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.)

Karen A. Michalak
(Typed or printed name of person signing)

Secretary
(Title of person signing)

FILING FEE: \$35