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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Executive Women's ON:	Golf Association Orl	ando Chapter.	Inc.
	N97000000499			
DOCUMENT NUMBER:			<u> </u>	
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Susan Macina				
		Name of Contact Pe	rson)	
		(Firm/ Company	·)	··
9889 Palmetto Dunes Ct				
		(Address)		
Orlando, FL 32832				
	(	City/ State and Zip (	Code)	
slmacina@gmail.com				
E	-mail address: (to be used	for future annual rep	ort notification	1)
For further information conc	erning this matter, please o	all:		
Susan Macina		aı	407	467-4070
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida [	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & U Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	<u>ddress</u>	Str	eet Address	

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

Executive Women's Golf Association Orlando Chap	ter, Inc.	
(Name of Corporation a	s currently filed with the Florida	Dept. of State)
N97000000499		
(Docume	nt Number of Corporation (if know	m)
Pursuant to the provisions of section 617.1006. Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not For Pr</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the c	orporation:	
LPGA Women Who Play - Orlando, FL, Inc.		The new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" o	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		
C. Enter new mailing address, if applicable:	av.	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		er the name of the
Name of New Registered Agent:		
<del>-</del>		ı street address)
New Registered Office Address:		
_		Florida
	(Ciţv)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the	
	Signature of New Registered	LAgent, if champing
	Page I of 4	(E) 8 21

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
Change     Add     Remove				
2) Change Add			<del>.</del>	
Remove 3 ) Change Add				
Remove 4) Change Add				
Remove 5) Change Add				
6) Change Add Remove				

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<b>,</b>	pecific)	nter change(s) here: Decific)	pecific)	pecific)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the amenwas/were sufficient for approval.	ndment(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	as/were
Dated 05/09/2018	
Signature Seeben Decens	<del></del>
(By the chairman or vice chairman of the board, president or other officer-if of have not been selected, by an incorporator – if in the hands of a receiver, tru other court appointed fiduciary by that fiduciary)	
Susan I., Macina	
(Typed or printed name of person signing)	
Director of Finance and Records	
(Title of person signing)	<del></del>