N9100002378

(Re	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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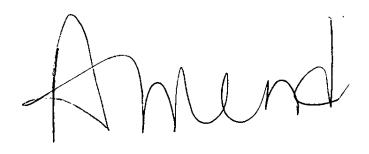
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2015 OCT 13 PH 4: 22
SECRETARY OF STATE



OCT 13 2015

ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is Enclosed)



September 30, 2015

DEBRA L. MOLESKI 2785 BERAN LANE MALABAR, FL 32950-3661

SUBJECT: CENTRAL FLORIDA HERDING CLUB, INC.

Ref. Number: N97000002378

We have received your document for CENTRAL FLORIDA HERDING CLUB, 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 715A00020705

Articles of Amendment

to
Articles of Incorporation

Central F	lorida H	erding Club Inc.
(Name of Corporation as c	urrently filed with t	he Florida Dept of State)
NGT		278
(Document	Number of Corporation	on (if known)
•	·	
Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "co	unoration" or "incor	The new
"Company" or "Co." may not be used in the name.	rporution or incor	portued of the dooreviation Corp. or the.
D. Frater new principal office address 'f we limble.		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
		<u>ما</u>
		TASE A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	73	
muning dualess MAT BE ATOST OFFICE BOX	/ 	Service III
		mo 3 C
		TO TO
		10 P
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		Florida, enter the name of the
new registered agent and/or the new registered o	ince address.	,
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		(Florida street address)
New Registered Office Attaless.		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered agent. I	am familiar with and	l accept the obligations of the position.
	Signature of Nev	v Registered Agent, if changing

address of each Officer (Attach additional sheets, Please note the officer/did P = President; V = Vice I	and/or Director t , if necessary) rector title by the j President; T= Trea = Chief Financial	ocin g added: first letter of the office title: isurer; S= Secretary; D= Director; TR= Tru Officer. If an officer/director holds more tha	director being removed and title, name, and ustee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office
	wes the corporation	n, Sally Smith is named the V and S. These s	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S:	ones .	
Type of Action (Check One)	Title	Name	Address
Change Add Remove	_D_	Joanne Korn	3115 Weber Rd. Malabar, FL 32950
2) Change Add	<u>vP</u>	Dr. Tom Gisango	1635 Rustic Way Melbourne, Fl
Remove 3) Change Add Remove	D	Sherry Lee	6880 F. Bronsonthy St. Cloud, FL 34772
4) Change Add Remove	D	Julia Washam	373 CarmelDr. Melbourne, FL 32940
Remove Change idd Add Remove	S	Dana Mardell address any	2630 Rocky Point Rd. Malabar, FL 32950
6) Change		· · · · · · · · · · · · · · · · · · ·	

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	October 8 2015	
	The date of each amendment(s) adoption: UCLOPS (9 50)	_, if other than the
_	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 date will not be document's effective date on the Department of State's records.	e listed as the
	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 10/8/15	
	Signature (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)	
	Debra L. Moleski (Typed or printed name of person signing)	
	President	
	(Title of person signing)	