N9800000 6/18

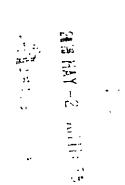
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	South Lake County H	listorical Society Inc		37
	98000006118			3.
The enclosed Articles of American	ndment and fee are subn	nitted for filing.		. •
Please return all corresponden	ce concerning this matte	r to the following:		*' •
James Briggs				,
		(Name of Contact Person)	
South Lake County Historical	Society Inc			
		(Fim/ Company)		
490 West Ave				
 		(Address)		
Clermont, FL 34711				
	-	(City/ State and Zip Code	:)	
perseverancefl@cs.com				
E-r	nail address: (to be used	for future annual report r	notification)	
For further information concer	ming this matter, please	cali:		
James Briggs		at	352 - 394 - ea Code) (Daytime Tele	8709
(1	Name of Contact Person)	(Ar	ea Code) (Daytime Tele	phone Number)
Enclosed is a check for the fol	llowing amount made pay	yable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

South Lake County Historical Society Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N98000006118 (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: Clermont Historical Society Inc. 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: (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: X Change X Remove X Add	PT <u>V</u> <u>SV</u>	John Do Mike Jor Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		-		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add Remove				
Kemove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

tach additional sheets, if necessary).	(Be specific)	
		-
		

		01/01/2019	.caaa
	this document was	• • • • • • • • • • • • • • • • • • • •	_, if other than the
Effe	ective date <u>if applic</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not be te on the Department of State's records.	e listed as the
Adoption of Amendment(s)		ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	There are no memladopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	04/26/2019	
	Signature	By the chairman or vice chairman of the board, president or other officer-if directors	
	1	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
		James Briggs	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	