## N99000004745

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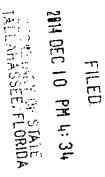
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: KIWANIS (LUB OF DEERWOOD, INC. DOCUMENT NUMBER: N99000004745 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SETER W. GENTRY (Firm/ Company) 10109 BISHOP LAKE RD W JACKGONVILLE, FL 32156
(City/State and Zip Code) P gentry & FLACRES. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PRTER CIENTRY at (904) 6/2-4999 (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

TO: Amendment Section

□\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

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□\$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

FILED.

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(Name of Corporation as currently	3 OF	DEERWOOD	Shift DEC 10	PM 4: 34
(Name of Corporation as currently	filed with t	the Florida Dept. of Stat	ย์ การทางไลมีก	THE STATE
				E FLORIDA
(Docum	nent Numbe	000 4745 er of Corporation (if know	n	
				•
rsuant to the provisions of section 617.10 nendment(s) to its Articles of Incorporation	06, Florida	Statutes, this <i>Florida Not</i>	For Profit Corpora	tion adopts the follow
·				
If amending name, enter the new nam				
KIWANIS CLUB ime must be distinguishable and contain th	OF D	EFRCREEK,	INC.	The
me must be distinguishable and contain the	he word "co	orporation" or "incorpor	ated" or the abbrevi	ation "Corp." or "In
Company" or "Co." may not be used in th	<u>1e name</u> .			
Enter new principal office address, if a				
rincipal office address <u>MUST BE A STR</u>	<u>EET ADD.</u>	<u>RESS</u> )		
			<del></del>	
Enter new mailing address, if applica	ble:			
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX	<u> </u>		<del></del>
			<del></del>	
If amending the registered agent and/o	or registere	<u>ed office address in Flori</u>	da, enter the name	of the
new registered agent and/or the new r	egistered o	office address:		
Name of New Registered Agent:				
_		(Florida street address,		
New Registered Office Address:				
_			, Florida	
		(City)		(Zip Code)
w Registered Agent's Signature, if char	nging Regi	stered Agent		
ereby accept the appointment as registere			ept the obligations o	of the position.
	Signatura	of New Registered Agent, i	f changing	
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Page 1 of 4

## 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 John Do V Mike Jo SV Sally So	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
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4) Change			
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5) Change	<del></del>		
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6) Change			
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<u>If amending</u> (a <i>ttach addit</i>	ional she	ets, if neces	sary). ' (i	Be specific)	e(s) ner	<b>=</b> *			
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The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated <u>Dec</u>	ember 8, 2014	
Signature MI	Will	
	man or vice chairman of the board, president or other officer-if directors	
	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
PRI	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
SECRA	(Title of person signing)	
	(Title of person signing)	