

PD80000048650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
08 SEP 22 PM 2:14

Amend
9/23



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2008

MARCELLUS OSCEOLA
SEMINOLE INDIAN CASINO, INC.
6341 NW 34 ST.
HOLLYWOOD, FL 33024

SUBJECT: SEMINOLE INDIAN CASINO INC
Ref. Number: P08000048650

We have received your document for SEMINOLE INDIAN CASINO INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 708A00045196

RECEIVED
2008 SEP 22 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SEMINOLE INDIAN CASINO, INC

DOCUMENT NUMBER: P08000048650

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

Please return all correspondence concerning this matter to the following:

MARCELLUS OSCEOLA
(Name of Contact Person)

SEMINOLE INDIAN CASINO, INC
(Firm/ Company)

6341 NW 34 ST
(Address)

HOLLYWOOD / FL / 33024
(City/ State and Zip Code)

For further information concerning this matter, please call:

MARCELLUS OSCEOLA at (954) 444-1448
(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 &
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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 SEP 22 PM 2:14

SEMINOLE INDIAN CASINO INC

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

08000048650

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

N/A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

NAME & ADDRESS OF DIRECTOR CHANGE?

FROM:

TO:

WILLIAM T. OSCEOLA

WILLIAM T. OSCEOLA

3160 NW 114 LN

6341 NW 34 ST

CORAL SPRINGS, FL

SEMINOLE INDIAN RESERVATION

33065

HOLLYWOOD, FL

33024

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 7.11.08

Effective date if applicable: 7.11.08
(no more than 90 days after amendment file date)

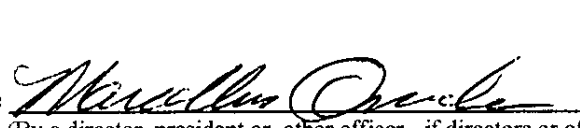
Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature


(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver/trustee, or other court appointed fiduciary by that fiduciary)

MARCELLUS OSCEOLA
(Typed or printed name of person signing)

WILLIAM OSCEOLA

REGISTERED AGENT

DIRECTOR

(Title of person signing)

FILING FEE: \$35