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EFFECTIVE DATE

May 1, 2018

APR 18 2018

I ALBRITTON

COVER LETTER

Division of Corporations
NAME OF CORPORATION: The DISCULAR POOL CLYB of DAY FORD BOOK BEACH, INC.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVID B. CRANSTON Name of Contact Person The DISCOUNT POOL CLYB INC Firm/Company 1149 Butter MILK LANE Address Port ORANGE FL 32129 City/State and Zip Code Le planning Quarthlink - Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (386) 453-4027 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

TO: Amendment Section

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

May 1, 2018.

The DISCOUNT POOL CLUB OF D,	AY TOWA BEACH, INC-
The Discourt Pool Club of D. (Name of Corporation as currently file PORODO 80134	ed with the Florida Dept. of State)
(Document Number of Con	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: The DOV BUHET OF VO name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NO Change
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	No Change
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	n Florida, enter the name of the
A & 7)	Change
Name of New Registered Agent	C_{MN}
(Florida street a	ddress)
New Registered Office Address:	, Florida
(City	o) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
NO Ch	Avae 18 1
Signature of New Regist	tered 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: XChange	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		NO Changes	
Add		•	
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
MO Chawges
NO CHANGE
F. If an amendment provides for an 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)
NO Charges
100 CHAINGES

The date of each amendment(s) adoption: $4-13-18$, if other than the date this document was signed.
Effective date if applicable: 5-1-8 (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 listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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.
Dated $U-13-18$
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)
Typed or printed name of person signing)
OCPSIDENT
(Title of person signing)