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SECRETARY OF SIAIL DIVISION OF CORPORATIONS

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MAY 2 5 2017

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	KATION:	LL OF FAME PARTNERS	, OCEANSIDE, INC	
DOCUMENT NUME	BER: P12000092514			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	GEORGE DEPOZSGAY			
		Name of Contact Person	1	
	ATTY.			
•	Firm/ Company			
	8950 SW 74 COURT SUITE 2201 D-5			
•	Address			
	MIAMI, FL 33156			
•		City/ State and Zip Code	<del>-</del>	
gdepo	ozsgay@aol.com			
	- · ·	sed for future annual report	notification)	
	(	• • • • • • • • • • • • • • • • • • •	,	
For further information	concerning this matter, pleas	e call:		
George dePozsgay		at ( <u>305</u>	448-2131	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

17 MAY 19 AM 10: 24

## Articles of Amendment to Articles of Incorporation of

SWIMMING HALL OF FAME PARTNERS, OCEANSIDE, INC.

(Name	of Corporation as curren	tly filed with the Florida Dept. of State)		
P12000092514				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ng amendn	nent(s) t
A. If amending name, enter the new n	ame of the corporation:			
SWIMMING HALL OF FAME PARTN	IERS, FORT LAUDERDA	ALE, INC.	The ne	ישר
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desigr vord "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the a "Co". A professional corporation name must "P.A."	ibbreviatio contain th	on he
B. Enter new principal office address, if applicable:		8950 SW 74 COURT		
Principal office address <u>MUST BE A S</u>		SUITE 2201 D-5		
		MIAMI, FL 33156		•
C. Enter new mailing address, if apple				
, 3		P.O. BOX 430823	17 !	SEC
		MIAMI, FL 33243-0823	20-	元子
			9	
<ol> <li>If amending the registered agent an new registered agent and/or the new</li> </ol>		dress in Florida, enter the name of the	PH	골
Name of New Registered Agent	N/A		AM 10: 24	)RR ARA
traine of from Register our Tigers	8950 SW 74 COURT, SUITE 2201 D-5		- 21	108
	(Florida s	treet address)		ίν
New Registered Office Address:	MIAMI	Florida 33156		

## 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.

X Change	<u>PT</u> .	ohn Doe			
X Remove	<u>v</u> !	Mike Jones			
X Add	<u>sv</u> <u>s</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change	N/A	N/A		N/A	
Add					
Remove					
2) Change	<u></u>				
Add					
Remove					
3) Change			<del></del>		
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change			· · · · · · · · · · · · · · · · · · ·		
Add					
Remove					

E. If amending or adding additional Articles, e (Attach additional sheets, if necessary). (Be	enter change(s) here: e specific)
N/A	
	<del></del>
	<del></del>
F. If an amendment provides for an exchange,	, reclassification, or cancellation of issued shares,
provisions for implementing the amendment (if not applicable, indicate N/A)	ent if not contained in the amendment itself:
N/A	

The date of each amendmen	N/A	te alconto do
date this document was signed		, if other than the
and this dovation was signed	IMMEDIATE	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
04/10 Dated	/2017	
Signature	Thurst	
	ly a director, president or other officer – if directors or officers have not been	***************************************
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
aj	ppointed fiduciary by that fiduciary)	
	SHERMAN R. WHITMORE	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
	(Title of person signing)	