P990000 36537

(F	Requestor's Name)	
(/	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PiCK-UP	☐ WAIT	MAIL
(£	Business Entity Name)	
(I	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	

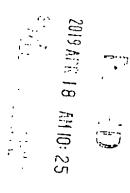
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03/11/19--01045--023 **52.50

R. WHITE



COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: The Wholestale Club, Inc

DOCUMENT NUMBER: P990000 36537 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person

The Wholesale Club. Inc

Firm/ Company

P.O. Box 375

Address

ONECO F. 34264

City/ State and Zip Code SMILLER 1212.68@YAHOV. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SEAN MILLER at (94) 737-3563

Name of Contact Person Area Code & Daytime Telephone Number linclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certificate of Status

Certified Copy

(Additional Copy is enclosed)



March 21, 2019

SEAN MILLER P.O. BOX 375 ONECO, FL 34264

SUBJECT: THE WHOLESALE CLUB, INC.

Ref. Number: P99000036537

We have received your document for THE WHOLESALE CLUB, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6050.

Letter Number: 319A00005640

Rebekah White Regulatory Specialist III



Articles of Amendment to

Articles of Incorporation of

E : D

	(Name of Corporation	as currently filed wit	th the Florida Dept. of	State) 10. 23
	P97000036	.537	 :	j,;E
		nt Number of Corporati	ion (if known)	
irsuant to the provisions of Articles of Incorporation:	f section 607.1006, Florida S	tatutes, this Florida Pi	rofit Corporation adopt	s the following amendmen
If amending name, ente	er the new name of the corp	oration:		
				The new
Corp.," "Inc.," or Co.," a	ble and contain the word or the designation "Corp," ional association," or the ab	"Inc," or "Co". A p		
	lice address, if applicable: UST BE A STREET ADDRI	ESS)		
			, <u> </u>	
		 		
Enter new mailing add (Mailing address MAY I	lress, if applicable: BE A POST OFFICE BOX			
If a more diagraph a magistary				F.A.b
	red agent and/or registered nd/or the new registered off		rida, enter the baine o	rtue
new registered agent an				
Name of New Register	tered Agent			
	stered Agent			
	stered Agent	(Florida street address))	
		(Florida street address,		orida

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:	эге, ана оа	uy smun, sv us un Auu.	
X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	T	William Chong	5 acasola FL 34243
<u></u> ✓ Add		,	SucasolaFL 34243
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Romovo			

	·	
		
an amendment provides for an exchange, reclassification, or can	cellation of issued shares,	
rovisions for implementing the amendment if not contained in th	e amendment itself:	
(if not applicable, indicate N/A)		
	· · · · · · · · · · · · · · · · · · ·	
		
	·	
		

The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this ment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amendme ent for approval.	nt(s)
	ed by the shareholders through voting groups. The following state is voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	<u></u> ."	
	(voting group)	
action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
Dated		
Signature	or, president or other officer – if directors or officers have not be	
	or, president of other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other c	
	iduciary by that fiduciary)	~
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	DINNER	
	(Title of person signing)	