## 704215

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Dc	cument Number)	<del></del>	
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## **COVER LETTER**

TO: Amendment Section

Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: TITUS VILLE ART LEAGUE INC 704215 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BARRY L'ASMAN
(Name of Contact Person) TITUSVILLE ARTLEAGUE INC
(Firm/ Company) TITUSVILLE, FL 32782
(City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BARRY L. ASMAN PRESIDENT at 561 7.27 4623
(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: \$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment

to

## Articles of Incorporation

	of	•	
TITUSVILLE ARG	TLEAGUE +	NG	5
(Name of Corporation as cur	rently filed with the Flo	rida Dept. of State)	<del>- </del> -
70421	5		
(Document Nu	imber of Corporation (if k	inown)	$\dashv$
ursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tutes, this Florida Not Fo	or Profit Corporation adopts the fo	llowii
. If amending name, enter the new name of the corpo	ration:		
NORTH BREVARD  ame must be distinguishable and contain the word "corp."	ART LEAGU	b tyc. T	he ne
Company" or "Co." may not be used in the name.	sranos. es meespesale	a or me approved that compression	
. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u> )		
	_		Ť
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>	<u> </u>	<del></del>
<ul> <li>If amending the registered agent and/or registered of new registered agent and/or the new registered office</li> </ul>		, enter the name of the	
Name of New Registered Agent:			
Name of New Regimered Agent.			ij
<del></del>	(F	ilorida strcet address)	1
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I an		t the obligations of the position.	
	Signature of New Regis	tered Agent, if changing	1

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 D V Mike J SV Sally S	<u>ones</u>						
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s					
1) Change	<u>NESIOENT</u>	BARRY L. ASMAN	235 CANAVERAL WAY  THUSUILLE FL 32780					
2) Change Add								
Remove 3 ) Change Add								
Remove 4) Change Add		· ···						
Remove  5) Change  Add Remove								
6) Change Add								
Remove		Page 2 of 4						

E. <u>If amending or adding additional Arti</u>	icles, enter change(s) here:
E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
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	e date of each amendment(s) adoption: CCT, 15, 2011 e this document was signed.	, if other than the
Eff	ective date if applicable: 0 CT, 15 2017	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (CHECK ONE)	
Þ	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 007.15 2017	
	Signature Bany & Comun  (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)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	\