

N080000000497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

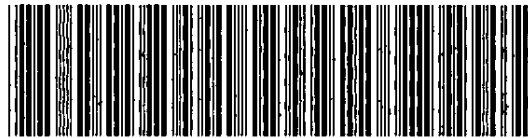
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300131641703

06/30/08--01030--023 **35.00

FILED
08 JUN 30 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend & N.C.

G. Couffette JUL 02 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Tampa Association of Insurance
and Financial Advisors, Inc.

DOCUMENT NUMBER: # N00000000497

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

Please return all correspondence concerning this matter to the following:

Wendy L. Battle
(Name of Contact Person)

NAIFA-Tampa
(Firm/ Company)

P.O. Box 47086
(Address)

Tampa, FL 33646
(City/ State and Zip Code)

For further information concerning this matter, please call:

Wendy L. Battle at (813) 991-0009
(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

Tampa Association of Insurance and Financial Advisors, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

N 00000000497

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

National Association of Insurance and Financial Advisors-Tampa, Inc.
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

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

Article X: The address of this corporation's
principal office shall be:

National Association of Insurance and Financial
Advisors-Tampa, Inc.

P.O. Box 47086

Tampa, FL 33646

FILED
08 JUN 30 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of adoption of the amendment(s) was: May 15, 2008

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

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature Steven P. Saladino, President
(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.)

Steven P. Saladino, LUTCF
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35