# N02000063

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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Junior A Florida, J DOCUMENT NUMBER: NO2000064		<u>dison Cou</u> nt
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Janie D. Bar (Name of C	nes - Treasurer ontact Person)	<u>-</u>
NA		
(Firm/	Company)	
235 N.E. Dahlia (Ad	Trail	<del></del>
Pinetta, FL 32 (City/State	350 and Zip Code)	
GRALUM 97 G E-mail address: (to be used	MSN.COM	on)
For further information concerning this matter, please of	eall:	
Janie D. Barnes (Name of Contact Person)	at ( <u>850</u> ) <u>673</u> — (Area Code & Daytime	7864 Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Department o	f 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)
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 C Tallahassee, FL 32301	ŕ

## **Articles of Amendment**

### SECRETARY OF STATE **Articles of Incorporation** (Name of Corporation as currently filed with the Florida Dept. of State) NO200006631 (Document Number of Corporation (if known)

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

the following amendment(s) to its Articles of it	ncorporation.		
A. If amending name, enter the new name of	of the corporatio	<u>n:</u>	•
Junior Auxiliary of Mc	adison Co	unty Florida	. Incorporated
The new name must be distinguishable and c abbreviation "Corp." or "Inc." <u>"Company" (</u>	contain the word	"corporation" or "ince	rporated" or the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		235 NE Dat Pinetta, FL	nlia Trail 32350
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		Same	<del> </del>
			<del></del>
D. If amending the registered agent and/or new registered agent and/or the new regi		•	er the name of the
Name of New Registered Agent:		). Barnes	<b>.</b>
New Registered Office Address:	235 N.E. (Flori	Dahlia, Traid da street address)	<u>(</u>
	Pinett	(City)	, Florida <u>323</u> 50 (Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered position.			t the obligations of the
	Janie C	) , POUNLS Registered Agent, if char	
۳)	ngnature of New	negisiereu Agem, ij chui	181118

Page 1 of 3

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)

<u>Title</u> President	Name Janis Bunting	Address	Type of Action
Pre <u>naeri</u> i	Junifounting	<u>282 Bevanl</u> Madison, F 32340	Remove
Vice <u>Presi</u> den	t <u>Kava Washington</u>	12353 NE Colin Pinetta, FL 32350	Kelly Hwy,  Add  Remove
Treasurer	Sarah Pike	134 NE Oregan Pinetta, Fl 32350	No Are. □ Add □ □ □ Add □ □ □ □ □ Add
		,	*See next page
	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe		3
•	ruld like to amend	• /	#
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	porations as: 38	•	
	701001[0113		
The C	ovrect FEI/EIN#	is: 3836580	38.
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#### 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Deputy Treasure	r <u>Janie Barnes</u>	235 NE Dahua Pinetta, Fi 32350	Add Add
President_	Kura Washington	12353 NE Colin Kel Pinetta, FL 32350	ly Hwyt⊅CAdd ☐ Remove
Vice-Pr <u>eside</u> nt	Lisa Flaurnoy	P.O. Box 43 Madison, Fl 32341	Add Remove
	ling or adding additional Articles, enti ditional sheets, if necessary). (Be spe		*See next page
		<u> </u>	<u> </u>
			<del> </del>
<del></del>			

### 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Treas <u>ure</u> r	Janie Barnes	235 NE Dahua Trail Pine Ha, FL 32350	Add Remove
Deputy Treasu	ver Elizabeth Waring	2830 NE Colin Kelly Hwy. Madison, FL 32346	Add ☐ Remove
			☐ Add ☐ Remove
	ing or adding additional Articles, enter ditional sheets, if necessary). (Be specif		
.,			
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The date of each amendment(s) adoption: 11/3/09
Effective date if applicable: (date of adoption is required)
(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(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 11/3/09
Signature(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, o other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President (Title of person signing)