## N0800000625

(Requestor's Name)	
(Address)	
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
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Certified Copies Certificates of Status	_
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08/29/11--01032--023 \*\*43.75

Amend + MC
Brown 8-31-11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: <u>Power</u>	143 Chapity 7	Inc
DOCUMENT NUM	BER: NO8000	006635	
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	•
	Frank D. N (Name of	Contact Person)	
	PoneR143 C	hanity Inc	
	(Firm	n/Company)	
6	831 Connen L	Address)	
	·	te and Zip Code)  O Gmall. com d for future annual report notificat	
For further information	on concerning this matter, pleas	e call:	
		at ( <u>\$13</u> ) <u>965-1</u> (Area Code & Daytimo	,
\$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)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation

POLIAUG 29

MILLAHASSEE UF STA

Articles of Incorporation
of

Power 143 Chap'ty Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

NO800006635

(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:

A. If amending name, enter the new name of	the corporation	<u>n:</u>		
Frank D. Murphy	Chan	itu	Fre	
The new name must be distinguishable and co	ntain the word	"corporat	tion" or "inc	orporated" or the
abbreviation "Corp." or "Inc." "Company" or	· "Co." may not	be used in	<u>n the name</u> .	
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET		Fran	KDA	ruphy
				<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			•	
D. If amending the registered agent and/or re	egistered office	address in	n Florida, en	ter the name of the
new registered agent and/or the new regis				<del></del>
Name of New Registered Agent:	Frank		Murph	7
New Registered Office Address:	(Flori	da street a	address)	_
				, Florida
-		(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

**Title** Name **Address** Type of Action ☐ Add ☐ Remove ☐ Add \_ 🔲 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment	
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or madopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated	8-25-11
Signature	
have	The chairman or vice chairman of the board, president or other officer-if directors on the not been selected, by an incorporator — if in the hands of a receiver, trustee, our court appointed fiduciary by that fiduciary)
·	Typed or printed name of person signing)
	President (Title of person signing)