N08000010102

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
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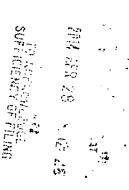
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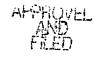
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1/38/14 5/5/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	sity Black Alumni Associa	tion, National Chapter, Incorporated
DOCUMENT NUMBER: NO800010	102	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Marian Deadwiley		
	(Name of Contact Person)
Florida State University Black Alumni	Association, Natio	nal Chapter, Incorporated
	. (Firm/ Company)	
P.O. Box 1322		
	(Address)	· · · · · · · · · · · · · · · · · · ·
Tallahassee, Florida 323	302-1322	
	(City/ State and Zip Code	2)
mdeadwiley@con	ncast.net	
E-mail address: (to be used	for future annual report n	otification)
For further information concerning this matter, please	call:	
Marian Deadwiley	_{at} 850	212-5709
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of 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	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



Articles of Amendment to Articles of Incorporation of

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Florida State University Black Alumni Asso	ciation, National Chapter,	
(Name of Corporation as currently filed with the Florida Dept. of State)		
N08000010102 ·		
. (Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutomendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corp</i>	oration adopts the following
A. If amending name, enter the new name of the corporat	tion:	
Florida State University National Blac	ck Alumni, Inc.	The new
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbi	
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		
		
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the na	ame of the
new registered agent and/or the new registered office		
Name of New Registered Agent: N/A		<u> </u>
	,	
New Post and Office Address	(Florida street address)	_
New Registered Office Address:		
(Cin.)	, Florid	
(City,	,	(Zip Code)
New Registered Agent's Signature, if changing Registered thereby accept the appointment as registered agent. I am for		one of the position
петену иссерстве арронитет из гезізіегей адет. Тат зе	лтини мин ини иссері те орндине	ms of the position.
Signature of New	v Registered Agent, if changing	-
Signature of tren		

Page 1 of 4

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.

Change	Example: X_Change X_Remove X_Add	<u>PT</u> <u>Y</u> <u>SV</u> .	John Doe Mike Jones Sally Smith			,
	Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
	1) Change		N/A			
2)Change	Add					
Add Remove 3) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add	Remove					
Remove 3) Change	2) Change					
3) Change Add	Add		,			
AddRemove 4)ChangeAddRemove 5)ChangeAddRemove 6)ChangeAdd	Remove			·		
Remove	3) Change					
4) Change	Add			·		
AddRemove 5)ChangeAddRemove 6)ChangeAddAdd	Remove					
Remove	4)Change					
5) Change	Add					
Add	Remove					
Remove	5) Change		·			—
6) Change	Add					
Add	Remove					
Add	6) Changa					
					 	
Pamoua	Add Remove				<u></u>	

 If amending or adding additional Art (attach additional sheets, if necessary). 	(Be specific)					
V/A						
177						
						
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The date of each amendment(s) adoption: APIII 17, 2014 late this document was signed.	, if other than th
Effective date if applicable: April 17, 2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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 April 252014 Signature Conning Pul	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by anincorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Connie E. Jenkins-Pye	
(Typed or printed name of person signing)	
President	
(Title of person signing)	