N0900000 3740

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	dress)			
(Cil	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	<u> </u>			

Office Use Only



900332669429

უგ/უგ/19--01029--001 ••35.00

19 AUG - 6 PM 1: 50

AUS 18 CT

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	IDA ASSOCIATION FO	R WOMEN LAWYER	CS, MARTIN COUNTY CHAPTER, I
DOCUMENT NUMBER:	3740	****	
The enclosed Articles of Amendment a	nd fee are submitted for fi	ling.	
Please return all correspondence concer	rning this matter to the following	lowing:	
Colleen B. Sullivan			
	(Name of C	Contact Person)	
Patch Reef Title Company, Inc.			
	(Firm/	Company)	-
819 SW Federal Hwy., Ste. 200			
	(A	ddress)	
Stuart, FL 34994			
	(City/ State	and Zip Code)	
csullivan@patchreeftitle.com			
E-mail addro	ess: (to be used for future a	annual report notificati	on)
For further information concerning this	matter, please call:		
Colleen B. Sullivan		772 at	872-7600 ext. 4
(Name of C	Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following ar	nount made payable to the	: Florida Department o	f State:
	Filing Fee & \$\Bigsquare\$\$ \$43.75 Feate of Status Certified (Addition enclosed)	Copy Cert nal copy is Cert l) (Ad	.50 Filing Fee ificate of Status ified Copy ditional Copy is flosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

FLORIDA ASSOCIATION FOR WOMEN LAW	YERS, MA	RTIN COUNT	TY CHAPTER, INC.			
(Name of Corporation	as curren	tly filed with t	he Florida Dept. of Stat	<u>e</u>)		
N09000003740						
(Document)	ment Numb	er of Corporation	on (if known)			
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida</i>	Not For Profit Corporat	ion adopts	the foll	lowing
A. If amending name, enter the new name of th	<u>e corpor</u> ati	on:				
					Th	ie new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam		ion" or "incor	porated" or the abbrevia	tion "Corp	." or "	'Inc. "
B. Enter new principal office address, if application	ıble:	1000 SE Mon	terey Commons Blvd., St	e. 306		
(Principal office address MUST BE A STREET A		Stuart, FL 349	996	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)					
				IXI IS	_	
D. If amending the registered agent and/or regi	stered offic	e address in F	lorida, enter the name o	of the	9 AUG	יור
new registered agent and/or the new register	Colleen B			- (のか) つって	<u>ئ</u> 1	;
Name of New Registered Agent:	-			<u> </u>		-111
	819 SW Federal Hwy., Stc. 200			52		<u> </u>
New Registered Office Address:			(Florida strevt address)	AD.	<u>ක</u> බ	
	Stuart		FI	34994 orida	4	
		(City)		Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	t. I am far	nition with and	accept the obligations of Registered Agent, if cha		n.	

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	<u>V</u> <u>N</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) X Change	<u>P</u>	Donna L. Eng	1000 SE Monterey Commons Blvd.
Add			Stc. 306
Remove			Stuart, FL 34996
2) X Change	<u>v</u>	Gloretta H. Hall	1115 SE Ocean Blvd
Add			Stuart, FL 34996-2517
Remove			
3) X Change	S	Melissa J. Clasen	850 NW Federal Hwy., Stc. 186
Add			Stuart, FL 34994-1019
Remove			
4) X Change	T	Colleen B. Sullivan	819 SW Federal Hwy., Stc. 200
Add	-		Stuart, FL 34994 E
Remove			19 AL
5) Change	D	Margaret Wood	17. Selling
Add			
X Remove			7877 55 10,1
б) Change	D	Linda Weiksnar	
Add			<u></u>
X Remove			

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 I V Mike SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	PREETHI SEKHARAN	
Add			
X Remove			
2) Change	D	CARRIE LAVARGNA	
X Remove			
3) Change	D	ROSE D. SCHNEIDER	
Add			19 SU ALL
X Remove			AUG TO
4) Change	D	JANE HUNSTON	- 5 P
Add			
X Remove			0 N
5) Change	D	JENNIFER L. WILLIAMSON	
Add			
X Remove			
6) Change	<u>D</u>	BARBARA A. COOK	
Add			
X Remove			

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	<u>V</u> <u>Mil</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	P/D	KATHRYN MCHALE	
Add X Remove			
2) Change	PD	JESSICA M. VANVALKENBURGI	
X Remove 3) Change	VD	DONNA L. ENG	₹.o
Add X Remove	D	ANDI E. TRAX	19 AUG - 6 F
4) Change Add X Remove			FA IN D
5) Change Add X Remove	SD	DAVINA TALA	
6) Change Add X Remove	<u>D</u>	KATE ELIZABETH BRADFORD	

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)					
						-
				+		
			-		-	_
					_	
						
		·······				_
	 		-			
			 _			
						
					 -	
				_		_
	_					
		-			_	
			-			
		<u></u>				
						-
-	·					
					SS	
	 -				1	79
					22.2	<u> </u>
					55.25	9-9
					JANY OF STATE ASSEEL FLORIDA	
·	.				- <u>```</u>	P
					STA NTS	
					- हुल	∵ •
						

	e date of each amendment(s) adoption: e this document was signed.		, if other than
	ective date <u>if applicable</u> :		
		to more than 90 days after amendment file date)	
No loc	te: If the date inserted in this block does nument's effective date on the Department	not meet the applicable statutory filing requirements, this date will not State's records.	ot be listed as the
۱d۰	option of Amendment(s)	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes east for the amendment(s)	
	There are no members or members entit adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
	Dated Signature		
	have not been selecte	rice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	_
	Colleen B. Sulliva	an	
		(Typed or printed name of person signing)	
	Treasurer	(Title of person signing)	19 A
		(Title of person signing)	FILE!
			~ Q

the