# N/000003523

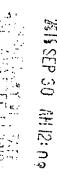
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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

COMMERCIAL REAL ESTATE WOMEN PALM BEACH/TREASURE COAST, INC.  NAME OF CORPORATION:
N10000003523 DOCÙMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ELLIE HALPERIN, ESQ.
(Name of Contact Person)
HALPERIN LAW
(Firm/ Company)
1601 Forum Place, Suite 500
(Address)
West Palm Beach, FL 33401
(City/ State and Zip Code)
ellie@halperin-law.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ellie Halperin, Esq. 561 478.4722 at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status  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

COMMERCIAL REAL ESTATE WOMEN PALI	м веасн	TREASURE COAS	T, INC.	
(Name of Corporation	as curren	tly filed with the Flo	orida Dept. of State)	
N10000003523				
(Docum	nent Numb	er of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not F</i>	For Profit Corporation adopts the	following
A. If amending name, enter the new name of the	e corporati	on:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporate	ed" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applica	ble:	N/A		. i
Principal office address MUST BE A STREET A				
				<u> </u>
				inta e
C. Enter new mailing address, if applicable:		N/A		( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
(Mailing address <u>MAY BE A POST OFFICE</u>	BOX)			<del></del>
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered</li> </ol>			, enter the name of the	
	N/A	<u>auress:</u>		
Name of New Registered Agent:				
		<del> </del>		
New Registered Office Address:		a	Florida street address)	
	N/A		<b></b>	
		(City)	, Florida (Zip Code)	
N B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>.</b>		( · F · · · · · ·	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen	Kegistered it. I am fai	<u>Agent:</u> niliar with and accer	ot the obligations of the position	
			GJ F va	
-	Si	gnature of New Regi	stered Agent, if changing	

	Type of Action	Title	Name ·	Address
1)	Change <u>x</u> Add	Pres	Laura King	1601 Forum Place Suite 500 West Palm Beach, FL 33401
⁄2)	Remove Change Add	D	Barbara Lebrun	8233-18 Gator Lane West Palm Beach, FL 33411
/3)	x Remove Change Add	D/T	Dawn Calder	8233-18 Gator Lane West Palm Beach, FL 33411
4)	x_ Removex_ Change Add	Т	Michele Pellico	1601 Forum Place, Suite 500 West Palm Beach, FL 33401
5)	Remove Change Add	VP	Sandi Quigley	1601 Forum Place, Suite 500 West Palm Beach, FL 33401
6)	Remove Change Add	VP	Rachael Rossmeissi-Stone	1601 Forum Place, Suite 500 West Palm Beach, FL 33401
J)	Remove Change Add	D	Ellie Halperin	1601 Forum Place, Suite 500 West Palm Beach, FL 33401
<b>/</b> 8)	x Remove Change Addx Remove	D	Judith Schumacher	8233-18 Gator Lane West Palm Beach, FL 33411

E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be'specific)	
-	
	<del></del>

The date of each amendment(s) adoption:		, if other than the	
date	e this document was signed.		
Eff	ective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)		
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.	listed as the	
Ad	option of Amendment(s) ( <u>CHECK ONE</u> )		
A	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 9.14.2016		
	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, or other court appointed fiduciary by that fiduciary)		
	Eleanor B. Halperin		
	(Typed or printed name of person signing)		
	Director		
	(Title of person signing)		