

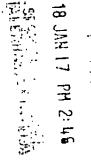
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R. WHITE
JAN 1 9 2018

COVER LETTER

TO: Amendment Section * Division of Corporations

NAME OF CORPORATION:	IARRISON MEMOR	IAL ALUMN ————	TASSOC	ATION, INC.	
DOCUMENT NUMBER:	N18000000	121			
The enclosed Articles of Amendment and t	ce are submitted for fil	ing,			
Please return all correspondence concerning	this matter to the folio	owing:			
	HARVEY R	. CLARKE			
	(Name of C	ontact Person	1)		
HARRISO	ON MEMORIAL ALU	MNI ASSOC	TATION,	INC.	
	(Firny)	Company)			
	4041 SW KAM	SLER ST.			
	(Ad	idress)	<u>_</u>		
	PORT SAINT LU	JCIE. FL 349	53		
	(City/ State	and Zip Code	:)		
	clarkehr@g	mail.com			
E-mail address: (to be used for future a	nnual report n	otification))	
For further information concerning this mat	er, please call:				
HARVEY R. CLAI	ККЕ	347 at	:	276-4593	
(Name of Cont	ict Person)		ra Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the following amour	nt made payable to the	Florida Depa	rtment of S	State:	
☐ \$35 Filing Fee ☐ \$43.75 Fili Certificate	ng Fee & \$\Bigsigmu \\$43.75 Fi of Status	Copy al copy is	Certiti Certiti) Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address			Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ft. 32304

FILED

Articles of Amendment

to

18 JAN 17 PM 2: 46

Artie	les of Incorporation	
HARRISON MEMORIAL AL	of UMNAE ASSOCIATÎ	SESSION INC.
(Name of Corporation as curr	ently filed with the FI	orida Dept. of State)
N18	000000121	
(Document Non	nber of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Statu imendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
HARRISON MEMORIAL ALUMNI ASSOCIATION, INC	- •	
name must be distinguishable and contain the word "corpor "Company" or "Co," may not be used in the name.	ation" or "incorporat	The new ted" or the abbreviation "Corp" or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u> ,	<u>S</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent		a, enter the name of the
New Registered Office Address:		Florida street address)
		EL 23
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	d Agent: àmiliar with and accep	ot the obligations of the position.
		istorial Amout of Amountain
	Signature at Nove Real	istorial Amount of characters

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>	in Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)			
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	01-01-2018	
	date of each amendment(s) adoption:	_, if other than the
tate	this document was signed.	
i ee	01-01-2018 ctive date i <u>f applicab</u> le:	
.,,	(no more than 90 days after amendment file date)	
Not loc	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	e listed as the
Ado	ption 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 4 8 7 8 8	
	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)	
	HARVEY R. CLARKE	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	