N190000 13135

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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Florida	Museum of Natural History, INC
DOCUMENT NUMBER: N 19000013	
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Thankle T Than	
	(Name of Contact Person)
	(Firm/ Company)
805 Bayview Dr.	
	(Address)
Ruskin, FL 33570	
,	(City/ State and Zip Code)
They have Q (mily and	
Thmuh. Or C GMail. com E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
	,
Thankle T Than	at 813 - 917-400 (Area Code) (Daytime Telephone Number)
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee &	□\$43.75 Filing Fee & 25 \$52.50 Filing Fee
Certificate of Status	Certified Copy Certificate of Status
	(Additional copy is Certified Copy enclosed) (Additional Copy is
	Enclosed) (Additional Copy is
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassec, FL 32303

Articles of Amendment to Articles of Incorporation of

Florida Museum OF Nat	wel History,	INC	
(Name of Corporation as currently filed with the F	lorida Dept. of State)		
N 190000 13135			
	nt Number of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this Florida Not Fo	or Profit Corporation adopts the	following
A. If amending name, enter the new name of the c	orporation:		
The Florida Museum Of	Concernation Au	S Natural History IN	CThe new
The Flor ida Museum Of name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	corporation" or "incorporated	I" or the abbreviation "Corp." o	r "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADd			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO			, ,
			7501 (111.22
D. If amending the registered agent and/or registenew registered agent and/or the new registered		enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Fi	orida street address)	
		, Florida	
_	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered agent.		the obligations of the position.	
	Signature of New Regist	ered Agent, if changing	

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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jon Sally Sm	neş	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
Change Add		-		
Remove			-	
2) Change Add				
Remove 3) Change Add Remove	- ··	-		
4) Change Add				
Remove			-	
5) Change Add				
Remove				
6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee			les, enter change(s) here: (Be specific)	
-				
		-		
			_	

The date of each amendment(s) adoption: 08-01-2020, if other than the date this document was signed.
Effective date if applicable: $08-01-2020$
Effective date if applicable: 08-01-2020 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption 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.

Signature	Theliate
(1	By the chairman or vice chairman of the board, president or other officer-if directed have not been selected, by an incorporator – if in the hands of a receiver, trustee, to other court appointed fiduciary by that fiduciary)
	Thankle T Than
	(Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.