N93000001833

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
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PICK-UP	WAIT	MAIL MAIL
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(Dx	ocument Number))
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Androld 10,18,14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ARCADIA	MAIN STR	EET PF	ROGRAM, INC.	
DOCUMENT NUMBER: N9300001	1833			
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
M. LINDA WILLIAMS				
	(Name of Contact P	erson)		_
ARCADIA MAIN STREE	T PROGI	RAM, I	INC.	
	(Firm/ Compan	y)		_
22 N POLK AVE				
	(Address)	 		_
ARCADIA, FL 34266				
	(City/ State and Zip	Code)		_
ARCADIAMAINS	_			
E-mail address: (to be use	d for future annual re	port notificati	on)	
For further information concerning this matter, please				
ANDREW AMES	at (863	3 ,49	94-6495	
(Name of Contact Person)	(Ar	ea Code & Da	aytime Telephone Number)	_
Enclosed is a check for the following amount made p	ayable to the Florida	Department of	of State:	
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & Certificate of Status}\$	_	is Cert	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ā D C	treet Address mendment Se ivision of Cor lifton Buildin 661 Executive	- ction porations	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

14 SEP 11 PM 12: 43

ARCADIA MAIN STREET PROGRAM, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N9300001833 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation:

N/A			The n
name must be distinguishable and contain th "Company" or "Co." may not be used in th	-	tion" or "incorporated" or the abbreviation "Corp	o." or "Inc
B. Enter new principal office address, if a Principal office address <u>MUST BE A STR</u>		N/A	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		N/A	
		e address in Florida, enter the name of the	····
new registered agent and/or the new r	egistered office a	ddress;	
New Registered Office Address:		(Florida street address)	
		, Florida	
	(City)	(Zip C	ode)
lew Registered Agent's Signature, if chan hereby accept the appointment as registere		Agent: niliar with and accept the obligations of the position	on.
	Signature of New	Registered Agent, if changing	

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.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Konore			
5) Change			
Add			
Remove			
6) Chanca			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE VII: DISSOLUTION

SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS, EDUCATIONAL, OR SCIENTIFIC PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FURTURE FEDERAL TAX CODE. UPON DISSOLUTION OF THE ORGANIZATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. OR CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE, ANY SUCH ASSETS NOT DISPOSED OF SHALL BE DISPOSED OF BY A COURT OF COMPETENT JURISDICTION IN THE COUNTY IN WHICH THE PRINCIPAL OFFICE OF THE ORGANIZATION IS THEN LOCATED, EXCLUSIVELY FOR SUCH PURPOSES OR TO ORGANIZATION OR ORGANIZATIONS, AS SAID COURT SHALL DETERMINE, WHICH ARE ORGANIZED AND OPERATED EXCLUSIVELY FOR FOR SUCH PURPOSES.

	date of each amendmen	• • • • • • • • • • • • • • • • • • • •	, if other than the
	ate this document was signed. O9/01/2014 O9/01/2014		
		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 9/0	1/2014	
	Signature	Linda Williams	
	(By the	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
		court appointed fiduciary by that fiduciary)	
	M LINI	DA WILLIAMS	
	 -	(Typed or printed name of person signing)	
	PRESI	DENT	
	 ' - ' - ' - ' - ' - ' - ' - ' - ' - 	(Title of person signing)	