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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE CHILDREN'S CORLITION, INCURPORTE
DOCUMENT NUMBER: N93 ØØØØ 2196
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CARLTON G. CARTWRIGHT (Name of Contact Person)
THE CHILDREN'S COALITION, INCORPORATED (Firm/Company)
440 SUNTH ROSEMARY AVENUE APT 10
WEST PALM BEACH, FL 33401 (City/ State and Zip Code)
Cart m 3 5 3 @ 9 mail. cm E-mail address: (to be used for Juture annual report notification)
For further information concerning this matter, please call:
CARIWR 6. CARIWR 16HT at 541.719.8106 (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 \$\sum \text{Certificate of Status}\$ \$\sum \text{S43.75 Filing Fee & Certificate of Status}\$ \$\sum \text{Certified Copy} \
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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THE CHILDREN'S CUAL (Name of Corporation as currently filed with the Florida I A 93 8 8 (Document Numb	Dept. of State) or of Corporation (if known)	CATED
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corp</i> o	oration adopts the following
A. If amending name, enter the new name of the corporate VETERANS MEMORIAL & I name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	MULTICULTURAL MIST	VPIKS, THE VRIVATE OPPORT THE NEW eviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7020
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		me of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida sireet addr	ess)
	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fail		ns of the position.
Si	gnature of New Registered 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: X Change X Remove X Add	PT John D Y Mike Jo SV Sally S		NOT APPLICABLE
Type of Action (Check One)	<u>Title</u>	Name .	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addin</u> (attach additional shee	ng additional Art	icles, enter change(s) here: (Be specific)	A
·			

The date of each amendment(s) adoption:	JUNE 10, 2020 JUNE 15, 2020	if other than the

<u>Note:</u> 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.

There are no mambers or mambers antitled to vote on the amendment(c). The amendment(c) was livered
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 10 JUNE 2020
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)
CARITON G. CARTURIGNT
(Typed or printed name of person signing)
EXECUTIVE DIRECTOR
(Title of person signing)