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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: <u>A</u> IIN	M FLORISA O	CHAPTER
DOCUMENT NUMI	BER: N 95	00000 4018	<u> </u>
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Stephen 1	Ayoub Contact Person)	
	(Tame of	Contact Person) Chapter Company)	
	POBOX 26	15-3 Address)	
	TAMPa. F	2 33623 - 6 te and Zip Code)	153
	` •	dmsinfo. Com	
_	n concerning this matter, pleas		. 2629
(Name	of Contact Person)	at (<u>813</u>) <u>263</u> (Area Code & Daytir	ne Telephone Number)
		payable to the Florida Department	
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations lox 6327 assee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente	ons

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently file	led with the	<u>Florida Dept.</u>	of State) ZMASE
Guef Coast Chapten of The (Name of Corporation as currently file)	0040	18	In Hunahmal
(Document Number of			
ursuant to the provisions of section 617.1006, Floridate following amendment(s) to its Articles of Incorporate		s Florida Not I	For Profit Corporation ado
. If amending name, enter the new name of the co	rporati <u>on:</u>		
AIIM FLORIDA	CHA	PTER	. Inc.
he new name must be distinguishable and contain the bbreviation "Corp." or "Inc." "Company" or "Co."	the word "co	orporation" or	"incorporated" or the
. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		10 APR 28 PM 3: 56 STATE STATE ORIDA
If amending the registered agent and/or register new registered agent and/or the new registered			a, enter the name of the
	omee addres	<u></u>	
Name of New Registered Agent:			
New Registered Office Address:	(Florida s	street address)	
			, Florida
	(0	City)	(Zip Code)

Page 1 of 3

Signature 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) **Title** Address **Type of Action** <u>Name</u> ☐ Add __ □ Remove __ 🔲 Add ____ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption:	APRIL 19, 2010
Effective date <u>if applicable</u> :	(date of adoption is required) APAIC 19 2010
(no mo	ore than 90 days after amendment file date)
Adoption of Amendment(s) (CI	HECK ONE)
The amendment(s) was/were adopted by th was/were sufficient for approval.	e members and the number of votes cast for the amendment(s)
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amendment(s) was/were
Dated	2010
Signature	// Twosumen
have not been select	rice chairman of the board, president or other officer-if directors ted, by an incorporator — if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)
	tephen Ayoub
(1)	yped or printed name of person signing) Resurce
	(Title of person signing)

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