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SEP 11 2015

R. WHITE

15 SEP -8 PHI2: 01

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	Florida Capital Res	source Center, Inc.		
DOCUMENT NUMBER: _	Machoghozem	C000PB N	10534	
The enclosed Articles of Am	endment and fee are sul	omitted for filing.	,	
Please return all corresponde	nce concerning this mat	ter to the following:		
Terence Lenamon				
		(Name of Contact P	erson)	
Florida Capital Resource Ce	enter, Inc.			
		(Firm/ Compan	y)	
226 E. Flagler St. Suite 200				
		(Address)		
Miami, FL 33131				
		(City/ State and Zip	Code)	
melissa@floridacapitalresou	rcecenter.org			
Е	-mail address: (to be use	ed for future annual re	port notification	on)
For further information conc	erning this matter, pleas	e call:		
Melissa Ortiz		at	305	338-8848
	(Name of Contact Perso		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fe	ollowing amount made p	payable to the Florida	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		Certi is Certi (Add	50 Filing Fec ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

1411

Florida Capital Resource Center, Inc.

15 SEP -8 PM 12: 01

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
N09000010534	FALLAMASSEE, FLOR
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
N/A	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>	) <sub>N/A</sub>
	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	N/A
	N/A
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
	udress:
Name of New Registered Agent: N/A	
	(Florida street address)
New Registered Office Address:	NVA
N/A	(City), Florida N/A (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent:
	ignature 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	<u>V</u> <u>Mik</u>	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	<u>T</u>	Stuart Hartstone	226 E Flagler St. Suite 200	
Add			Miami, FL 33131	
X Remove				_
2) Change	Т	Melissa Ortiz	226 E Flagler St. Suite 200	
x Add			Miami, FL 33131	_
Remove				_
3) Change				_
Add				_
Remove				_
4) Change				_
Add				_
Remove				_
5) Change				_
Add				_
Remove				_
6) Change	<del></del>		-	_
Add				_
Remove				

•	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary). (Be specific)	
N/A		
······		
-		

	<b>3</b>	9/4/15	
	date of each amendment(s) ad this document was signed.	option:	, if other than the
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file d	late)
	e: If the date inserted in this blocument's effective date on the Dep	k does not meet the applicable statutory filing requiartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)		( <u>CHECK ONE</u> )	
	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast .	for the amendment(s)
	There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amends.	idment(s) was/were
	Dated 9/4/15		
	Signature / lu	u I	
	(By the chair have not bec	nan or vice chairman of the board, president or othen selected, by an incorporator – if in the hands of a ppointed fiduciary by that fiduciary)	
	Terence	Lenamon	
		(Typed or printed name of person sig	ning)
	Presiden	and Chairman of the Board	
		(Title of person signing)	