

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ви | isiness Entity Na | me) |
| (Do | ocument Number |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



900319844399

10/23/18--01025--009 **45.75

tud

R. WHITE NOV 2 6 2013 2018 NOV 19 PM 12: 18
SECRETHEY OF STATE
TALLAHASSEE

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION | | of the Florida Fede | ration of Busin | ess and Professional Women's Club |
|-------------------------------|---|---|----------------------|--|
| DOCUMENT NUMBER: | 709824 | | | - |
| The enclosed Articles of Am | endment and fee are subm | nitted for filing. | | |
| Please return all corresponde | ence concerning this matter | r to the following: | | |
| Tami Simms | | | | |
| | | (Name of Contact Pe | erson) | |
| President, EFFPBPWC | | | | |
| | | (Firm/ Company | ·) | |
| 238 Beach Drive NE | | | | |
| | | (Address) | | |
| St. Petersburg, FL 33701 | | | | |
| | (| (City/ State and Zip | Code) | |
| tami@simmsteam.com | | | | |
| ———Е | -mail address: (to be used | for future annual rep | ort notification |) |
| For further information conc | eming this matter, please of | call: | | |
| Tami Simms, President | | at | 727 | 743-6262 |
| | (Name of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the f | ollowing amount made pay | yable to the Florida I | Department of S | State: |
| ☐ \$35 Filing Fee | E\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | Certifi s Certifi | O Filing Fee cate of Status ed Copy ional Copy is sed) |

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



October 31, 2018

TAMI SIMMS 238 BEACH DR NE ST PETERSBURG, FL 33701

SUBJECT: EDUCATION FOUNDATION OF THE FLORIDA FEDERATION OF

BUSINESS AND PROFESSIONAL WOMEN'S CLUBS, INC.

Ref. Number: 709824

We have received your document for EDUCATION FOUNDATION OF THE FLORIDA FEDERATION OF BUSINESS AND PROFESSIONAL WOMEN'S CLUBS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please file the document as either Articles of Amendment or Restated Articles of Incorporation pursuant to applicable Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 718A00022490

RECEIVED

SIBNOV 19 PN 1:40

ECRETARY OF STATE

DO TO TO DO DOY GOOD MILL THE CLOSE

COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPORATION | | of the Florida Feder | ration of Busin | ess and Professional Women's Club |
|-------------------------------|---|------------------------|----------------------|--|
| DOCUMENT NUMBER: | 709824 | | | |
| The enclosed Articles of Am | nendment and fee are subm | nitted for filing. | | |
| Please return all corresponde | ence concerning this matter | to the following: | | |
| Tami Simms | | | | |
| | | (Name of Contact Pe | erson) | |
| President, EFFPBPWC | | | | |
| | | (Firm/ Company | ') | |
| 238 Beach Drive NE | | | | |
| | | (Address) | | |
| St. Petersburg, FL 33701 | | | | |
| | (| (City/ State and Zip (| Code) | |
| tami@simmsteam.com | | | | |
| E | -mail address: (to be used | for future annual rep | ort notification | 1) |
| For further information cond | erning this matter, please o | all: | | |
| Tami Simms, President | | ai | 727 | 743-6262 |
| | (Name of Contact Person) | | | (Daytime Telephone Number) |
| Enclosed is a check for the f | ollowing amount made pay | able to the Florida I | Department of S | State: |
| S35 Filing Fee | ■\$43.75 Filing Fee & Certificate of Status | | Certifi s Certifi | O Filing Fee icate of Status ied Copy tional Copy is used) |
| Malling A | ddraec | S+- | mat Address | |

Malling 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 Articles of Incorporation of

FILED

| A decident | of | 2018 NOV 19 PM 12: 18 |
|---|----------------------------|---|
| Education Foundation of the Florida Federation of Business a | | omen's Clubs, Inc. |
| (Name of Corporation as curren | tly filed with the | Florida Dept. of State) IALL: U.S. STATE [ALL AHASSEE, FL |
| 709824 | | MELMINOSELVII |
| (Document Numb | er of Corporation (| (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | es, this <i>Florida No</i> | t For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporate | 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 "incorpor | |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address MUST BE A STREET ADDRESS |) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| (Manual mares MAT BE A LOST OFFICE BOX) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered offle | ce address in Flor | ids, enter the pame of the |
| new registered agent and/or the new registered office a | ddress; | |
| Name of New Registered Agent: N/A | | |
| | | |
| New Registered Office Address: | | (Florida street address) |
| | | |
| | (Cim) | Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai | | cept the obligations of the position. |
| <u>- </u> | ignature of New Re | egistered 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 officeridirector 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>Y Mil</u> | n Doe te Iones ty Smith | |
|----------------------------------|--------------|-------------------------------|---------------------------|
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | | Venita Garvin | P. O. Box 522744 |
| Add | | | Marathon Shores, FL 33052 |
| X Remove | | | |
| 2) Change | <u>S</u> | Cynthia Jenkins | 4690 Menhaven Drive |
| Add | | | St. Petersburg, Fl. 33705 |
| X Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5)Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | <u></u> |

| (attach additional sheets, if necessary). (Be specific) | | | |
|--|--|--|--|
| Article VII - Changed officers to eliminate Vice President and consolidate to one Secretary | | | |
| Article VII - Changed total number of additional directors to three | | | |
| Article X - Changed "Annual" to "Membership" Conference | | | |
| Article X - Provided for the Board of Directors to effect amendments to the Articles necessitated by Bylaws amendments | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

· . .

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

| | June 16, 2018 | |
|-----------|---|---------------------------|
| The date | e of each amendment(s) adoption: | , if other than the |
| date this | document was signed. | |
| Effective | e date <u>if applicable</u> : | |
| | (no more than 90 days after amendment file date) | |
| | the date inserted in this block does not meet the applicable statutory filing requirements, this date value on the Department of State's records. | xill not be listed as the |
| Adoption | n of Amendment(s) (<u>CHECK ONE</u>) | |
| | e amendment(s) was/were adopted by the members and the number of votes cast for the amendment s/were sufficient for approval. | (s) |
| | ere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors | |
| | Dated 10-11-18 Junios | |
| | Signature Janua Sumas | |
| | (By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| | Tami R. Simms | |
| | (Typed or printed name of person signing) | • |
| | President | |
| | (Title of person signing) | - |