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Amund 10,3/28/14

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: Jackson County Chamber of Commerce, Ire
DOCUMENT NUMBER: 117021
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeff Massey (Name of Contact Person)
(Name of Contact Person)
Tackson County Chamber of Commerce Inc. (Firm/Company)
PD Box 130
(Address)
Martanne, PL 32447 (City/ State and Zip Code)
(City/ State and Zip Code)
Seft @ Jackson County, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (850) 482-8060 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

		34 Tale An
A	rticles of Amendment	14
`	to	
Art	ticles of Incorporation	**************************************
Jackson County	chamber of	Commerce 34
(Name of Corporation as currently filed with the	e Florida Dept. of State)	INCI
71-	1721	1100 .
(Document Number of	of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Pr	ofit Corporation adopts the following
. If amending name, enter the new name of the corpo	oration:	
NIA		m
ame must be distinguishable and contain the word "corp	noration" or "incorporated" o	The ne r the abbreviation "Corn" or "Inc
Company" or "Co." may not be used in the name.	voranon or meorporanea o	the distreviation corp. or the
	$\Delta \cdot (C)$	
Enter new principal office address, if applicable: Principal office address <u>MUST-BE A STREET ADDRE</u>	$\frac{\mathcal{O}(1)^{T}}{\mathcal{O}(1)^{T}}$	
The office dutiess most-be ASTREET ADDRE	<u> </u>	
	<u>.</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	
· · · · · · · · · · · · · · · · · · ·		•
the State of the S		
. If amending the registered agent and/or registered		<u>er the name of the</u>
new registered agent and/or the new registered offi	<u>ice address:</u>	
Name of New Registered Agent:) 	
New Registered Office Address:	(Florida street address)	
~ ·	1 .Δ	
<i>D</i>	104	_, Florida
(0	Lity)	(Zip Code)
ew Registered Agent's Signature, if changing Registe	ered Agent:	
hereby accept the appointment as registered agent. I are	m familiar with and accept the	obligations of the position.
	· ^ · · · ·	
<i></i>	0114	
	New Registered Agent, if chang	ing

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	V Mike	<u>l Doe</u> e <u>Jones</u> y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	<u> </u>	Tamarah Pasmussen	4318 Lafayette St. Marianna, Fl 3244
2) Change Add		Jim Froh	4318 Lafayette St. Marianna, FL 32446
Remove 3) Change	·	· ·	
Add Remove		∶.	
4) Change Add Remove			
5) Change Add Remove			
6) Change			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
(anuch distintional sheets, if necessary).	(ne specific)					
DIA						
						
	100 100 100 100 100 100 100 100 100 100					
**						
,	•					
······································						

	this document was signed.	_, if other than the
Effe	(no more than 90 days after amendment file date) (no more than 90 days after amendment file date)	<u>·</u>
Ada	option of Amendment(s) (<u>CHECK ONE</u>)	
Œ	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 members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 3/25/14 Signature aller Jefferies Massey	
	Signature allen Jafferres Wassey	_
	(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)	
	Allen Jefferies Wassey (Typed or printed name of person signing)	
	President/CED	
	(Title of person signing)	