

717 758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

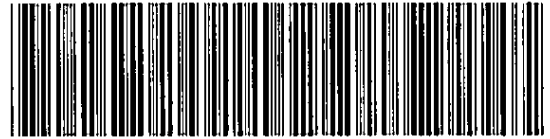
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/01/19--01014--004 **43.75

FILED

2019 AUG 19 P 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 20 2019
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sanford Chamber of Commerce, Inc.

DOCUMENT NUMBER: 717758

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Fulford

(Name of Contact Person)

Sanford Chamber of Commerce

(Firm/ Company)

230 East First Street

(Address)

Sanford, FL 32771

(City/ State and Zip Code)

kim@sanfordchamber.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Fulford

407

322-2212

at

(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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
Clifton Building



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2019

KIMBERLY FULFORD
230 E 1ST ST
SANFORD, FL 32771

SUBJECT: SANFORD CHAMBER OF COMMERCE, INC.
Ref. Number: 717758

We have received your document for SANFORD CHAMBER OF COMMERCE, 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 have Suzanne Kelly sign the amendment.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 819A00016174

2019 AUG 19 PM 1:31

RECEIVED

Articles of Amendment
to
Articles of Incorporation
of

Sanford Chamber of Commerce, Inc.

FILED

(Name of Corporation as currently filed with the Florida Dept. of State)

717758

2019 AUG 19 PM 5:03

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Kimberly Fulford

230 East First Street

(Florida street address)

New Registered Office Address:

Sanford

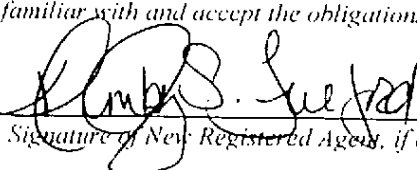
(City)

Florida 32771

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change	<u>C</u>	<u>Suzanne Kelly</u>	<u>3587 Lake Emma Road</u>
<input type="checkbox"/> Add			<u>Lake Mary, FL 32746</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>T</u>	<u>Frank Hale</u>	<u>400 East First Street</u>
<input type="checkbox"/> Add			<u>Sanford, FL 32771</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>VC</u>	<u>Rick Vaughn</u>	<u>107 West Commercial Street</u>
<input checked="" type="checkbox"/> Add			<u>Sanford, FL 32771</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>T</u>	<u>Kathryn Townsend</u>	<u>444 Timberwood Trail</u>
<input checked="" type="checkbox"/> Add			<u>Oviedo, FL 32765</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>PC</u>	<u>Scott Sturgill</u>	<u>455 Specialty Point</u>
<input type="checkbox"/> Add			<u>Sanford, FL 32771</u>
<input checked="" type="checkbox"/> Remove			
6) <input checked="" type="checkbox"/> Change	<u>PC</u>	<u>Scott Williams</u>	<u>P.O. Box 470397</u>
<input type="checkbox"/> Add			<u>Lake Monroe, FL 32747</u>
<input type="checkbox"/> Remove			

[illegible]

01/01/2019

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

07/26/2019

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: 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 members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

8/16/19

Signature

Suzanne Kelly

(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)

Suzanne Kelly

(Typed or printed name of person signing)

Chairman

(Title of person signing)