

719602

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*Name Change
Amend*

05/11/07--01021--010 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 MAY 11 AM 10:50

FILED

*AOR
5/16/07*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Mental Health Association of Northeast Florida, Inc.

DOCUMENT NUMBER: 719602

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

Please return all correspondence concerning this matter to the following:

Debra S. Hill

(Name of Contact Person)

The Hill Law Firm

(Firm/ Company)

8834 Goodby's Executive Dr. Ste. A

(Address)

Jacksonville, FL 32217

(City/ State and Zip Code)

For further information concerning this matter, please call:

Debra S. Hill

(Name of Contact Person)

at (904) 346-0140

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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)

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

FILED

2007 MAY 11 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(Dept. of State)

(Document number of corporation (if known))

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may **not** be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: 01/01/2007

Effective date if applicable: 01/01/2007
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

Susan F. Byrne
(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.)

Susan F. Byrne
(Typed or printed name of person signing)

President & CEO
(Title of person signing)

FILING FEE: \$35