

721122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

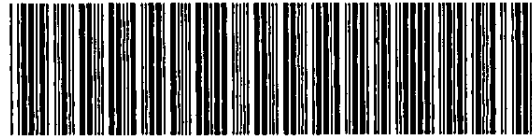
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13 AUG 12 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
AUG 15 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Wakulla County Senior Citizens Council, Inc.

DOCUMENT NUMBER: 72 11 22

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

Please return all correspondence concerning this matter to the following:

Dee Parker

(Name of Contact Person)

Wakulla County Senior Citizens Council, Inc

(Firm/ Company)

33 Michael Drive

(Address)

Crawfordville, FL 32327

(City/ State and Zip Code)

dparker@wakullasenioreitizens.com

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

For further information concerning this matter, please call:

Dee Parker

(Name of Contact Person)

at (

850) 926-7145 x224

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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

Articles of Amendment
to
Articles of Incorporation
of

FILED

13 AUG 12 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Wakulla County Senior Citizens Council, Inc

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

721122

(Document Number of Corporation (if known))

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:

Wakulla Senior Citizens Council, Inc

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)

NA

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

Susan Payne Turner

New Registered Office Address:

141 Harvey Mill Road

Crawfordville

(City)

Florida

32327

(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.

SEE LAST PAGE FOR SIGNATURE

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

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>Margaret MacKin</u>	<u>116 Wildwood</u> <u>Crawfordville, FL</u> <u>32327</u>
2) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>P</u>	<u>Susan Payne Turner</u>	<u>141 Harvey Mill Road</u> <u>Crawfordville, FL</u> <u>32327</u>
3) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>V</u>	<u>Linda Boles</u>	<u>P.O. Box 966</u> <u>Crawfordville, FL</u> <u>32327</u>
4) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	____	<u>Queen Webster</u>	<u>75 Harvey Melton Road</u> <u>Crawfordville, FL</u> <u>32327</u>
5) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	____	<u>Beulah King</u>	<u>111 Shat-mel-re Lane</u> <u>Crawfordville, FL</u> <u>32327</u>
6) ____ Change ____ Add <input checked="" type="checkbox"/> Remove	____	<u>Maurice Langston</u>	<u>716 Rehwinkei Road</u> <u>Crawfordville, FL</u> <u>32327</u>

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.

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Example:

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		James Taylor	P.O. Box 185 Panacea, FL 32346
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove		Larry Massa	256 Magnolia Ridge Crawfordville, FL 32327
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	TS	Virginia Moore	P.O. Box 457 Panacea, FL 32346
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Becky Black	53 Coastal Hwy. Panacea, FL. 32346
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Kathie Brown	P.O. Box 9 Panacea, FL 32346
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Donna Card	58 River Plantation Road Crawfordville, FL 32327

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 type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Jack Henderson</u>	<u>898 Rehwinkel Road</u> <u>Crawfordville, FL</u> <u>32327</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Susan Jones</u>	<u>29 Evalce Road</u> <u>Crawfordville, FL</u> <u>32327</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Carolyn Lambert</u>	<u>447 Aaron Road</u> <u>Crawfordville, FL</u> <u>32327</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Bobby Porter</u>	<u>45 Curtis Mill Road</u> <u>Sopchappy, FL</u> <u>32358</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

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

(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: 7/31/2013

Effective date if applicable: NA
(no more than 90 days after amendment file date)

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13 AUG 12 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 July 31, 2013

Signature Susan Payne Turner
(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 Payne Turner
(Typed or printed name of person signing)

Board Chair / President / Registered Agent
(Title of person signing)