728040

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Amend

JAN U 8 ZUZU I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	FOUNDATION OF ZETA	N BETA TA	.U, INC.
DOCUMENT NUMBER:		 	
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this matt	ter to the following:		
CLIFF S. SCHNEIDER, ESQ.			
	(Name of Contact Perso	n)	
COHEN SCHNIEDER LAW P.C.			
	(Firm/ Company)		
275 MADISON AVE, STE 1905			
	(Address)		
NEW YORK, NY 10016			
	(City/ State and Zip Cod	le)	
CSCHNEIDER@COHENSCHNEIDER.COM			
E-mail address: (to be use	d for future annual report	notification)
For further information concerning this matter, please	e call:		
MATTHEW TOBE	31 at		334-1898
(Name of Contact Person	n) (A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Dep	artment of	State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) 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

Articles of Amendment to Articles of Incorporation of



ALPHA OMEGA FOUNDATION OF ZETA BETA TAU, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 728040 (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: Not applicable 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. Not applicable B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: Not 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: Not applicable Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (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. Not applicable 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: X Change X Remove X Add	<u>V</u> <u>M</u> i	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TR	FRED E. LEVINSON	1925 LARGO RD.
Ađd			JACKSONVILLE, FL 32207
X Remove			
2) Change	P	CLIFF S. SCHNEIDER, ESQ.	200 EAST 87TH ST. APT 8J
XAdd			NEW YORK, NY 10128
Remove			
3) Change	<u>s</u>	SCOTT E. SILBERFEIN, ESQ.	S OAK WAY
X Add			SCARSDALE, NY 10583
Remove			
4) Change	<u>T</u>	MICHAEL V. JORDAN, CPA	1841 W. BERTEAU AVE.
X Add			CHICAGO, IL 60613
Remove			
5) Change	TR	SANTIAGO J. RODRIGUEZ	1161 SW 118TH TERRACE
X Add			DAVIE, FL 33325
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)					
Not applicable						
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		11/10/2019			
	ch amendment(s) ac ient was signed.		<u> </u>		, if other than the
Effective date	if applicable:	Not appl	icable		
		(no more than 90 days	after amendment file	date)	
		ock does not meet the applicab partment of State's records.	le statutory filing red	quirements, this date will not	be listed as the
Adoption of A	mendment(s)	(<u>CHECK ONE</u>)			
	dment(s) was/were ac sufficient for approva	dopted by the members and that!	e number of votes ca	st for the amendment(s)	
	no members or members the board of directors	bers entitled to vote on the amors.	endment(s). The am	endment(s) was/were	
D	Dated [[][S	5/19			
S	ignature	AAT			
	have not be	man or vice chairman of the been selected, by an incorporato appointed fiduciary by that fid	r - if in the hands of		
		President			
		(Typed or prin	ted name of person s	igning)	
		Cliff S. Sch	neider		
		(Ti	tle of person signing)	