729418

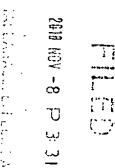
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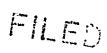
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

Florida Indian Hobb	oyist Association, Inc.		
729418 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	-		
Please return all correspondence concerning this matt	•		
Richard Gallant - President			
	(Name of Contact P	erson)	
Florida Indian Hobbyist Association, Inc.			
	(Firm/ Company	y)	
1541 SW Fresno Rd			
	(Address)		
Port St Lucie, Florida 34953			
	(City/ State and Zip	Code)	
president@FIHA.us			
E-mail address: (to be use	d for future annual rep	oort notificatio	n)
For further information concerning this matter, please	e call:		
Kristen Gallant	at	561	248-6284
(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the following amount made page 2000 and 2000 are the following amount made page 2000 are the following amount made 2000 are the following amount made 2000 are the following amount made 2000 are the following are the foll	ayable to the Florida l	Department of	State:
✓ \$35 Filing Fee		Certil is Certil (Add	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address mendment Sect vision of Corp ifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Florida Indian Hobbyist Association, Inc		2011 NOV
(Name of Corporation as	currently filed with the Flo	
729418		Markey Commencer
(Documen	Number of Corporation (if I	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
Florida Indian Heritage Association, Inc.		The ne
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporate	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>	<u>N/A</u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered a		, enter the name of the
Name of New Registered Agent:	'A	
New Registered Office Address:	(P	lorida street address)
	Ά	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regis	tered Agent, if changing

October 14, 2018	
The date of each amendment(s) adoption:, if other the	an the
date this document was signed.	
October 14, 2018	
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.	iť
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.	
November 5, 2018 Dated	
Signature	
(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)	
Richard Gallant	
(Typed or printed name of person signing)	
President	
(Title of person signing)	