## 737756

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(Requestor's Name)	
(Address)	_
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

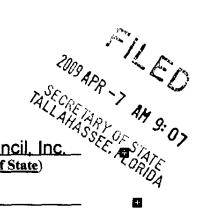
NAME OF CORPORATION: St. Vincent de Paul Society Naples District Council, Inc.				
DOCUMENT NU	J <b>MBER:</b> 737756			
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning the	is matter to the following:		
Car	olyn S. Henry			
	(Name	of Contact Person)		
St.	Vincent de Paul Society			
	(Fi	rm/ Company)		
287	/4 Davis Blvd.	(Address)		
Na	oles, Florida 34104			
		tate and Zip Code)		
For further inform	ation concerning this matter,	please call:		
Carolyn Henry	ne of Contact Person)	at ( 239 ) 775-166 (Area Code & Daytime		
•	•	nade payable to the Florida Dep	•	
\$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 A		Street Address Amendment Section		
Amendment Section Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment **Articles of Incorporation** of

737756



St. Vincent de Paul Society Naples District Council. Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

(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; 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: New Registered Office Address: (Florida street 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.

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)

<u>Title</u>	Name	Address	Type of Action
-			Add Remove
***************************************	*	-11	Add Remove
			Add Remove
(attach addit	or adding additional Articles, enter chional sheets, if necessary). (Be specific, mended to read: "Upon the dissolu	)	r all debts
have been sa	atisfied, assets shall revert to anoth	ner corporation organized ex	cclusively
for charitable	purposes under 501(c)(3) of the Ir	nternal Revenue Code, or th	ie
correspondin	g section of any future federal tax	code."	
			<u>,</u>
		·	
			•

The date of each amendment(s) adoption: April 3, 2009				
Effective date if applicable:	April 3, 2009			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.			
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.			
Dated Apri	Stabladasiah			
(By	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)			
	Rita Broderick (Typed or printed name of person signing)			
	President, Board of Directors (Title of person signing)			
	(Title of person signing)			