## 739286

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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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C. GOLDEN AUG 3 0 2018

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	THE GENEALOGI	CAL SOCIETY OF	BROWARD	COUNTY, INC.
DOCUMENT NUMBER	739286			
The enclosed Articles of A	mendment and fee are sub-	mitted for filing.		
Please return all correspon-	dence concerning this matte	er to the following:		
James W. Reep				
		(Name of Contact P	erson)	
		(Firm/ Compan	;)	
2141 NW 67th Ave				
		(Address)	<del></del>	
Sunrise, FL 33313				
		(City/ State and Zip	Code)	<del></del>
treasurer@gsbcfl.org				
	E-mail address: (to be used	for future annual rep	ort notification	0)
For further information con	cerning this matter, please	call:		
James W. Reep		at	563	508-9958
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pag	yable to the Florida I	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	Address	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

2018 AUG 29 PM 4: 44 THE GENEALOGICAL SOCIETY OF BROWARD COUNTY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 739286 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: (Florida street address) New Registered Office Address: , Florida \_ (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)

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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	Treasure c	James W. Reep	2141 NW 67th Ave
Add			Sunrise, FL 33313
Remove			
2) X Change	Director	Douglas Glover	8635 SW 1st Place
Add			Coral Springs, FL 33071
Remove			
3) Change	Treasure 7	Sharon Y Youmans	4250 Galt Ocean Drive
Add			6N
X Remove			Fort Lauderdale, FL 33308
4) Change			
Remove			
5) Change			
Add			
Remove			
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Add			
Remove			

If amending or adding (attach additional sheet	s, if necessary).	(Be specific)				
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The	N/A he date of each amendment(s) adoption:	than the
	ate this document was signed.	man the
	N/A	
Effe	ffective date if applicable:	
	(no more than 90 days after amendment file date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records.	the
Ado	doption 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.	
	08/23/18 Dated	
	An - 1 0 0-	
	Signature Muril . Roof	
	(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)	
	other court appointed reductary by that reductary)	
	James W. Reep	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	