## 742869

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:					
742869 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are	submitted for filing.				
Please return all correspondence concerning this	matter to the following:				
William Foutz Sr.					
	(Name of Contact	Person)			
	(Firm/ Compa	ny)			
6504 NORTH MERIDIAN ROAD		High	<b>%</b> *		
TALLAHASSEE,FLORIDA 32312	(Address) (City/ State and Zip	o ( <b>G</b> tle)			
YFOUTZSETT@COMCAST.NET  E-mail address: (to be	used for future annual re		)		
For further information concerning this matter, pl	ease call:				
William Foutz Sr.	\$	850 at	668-3297		
(Name of Contact Pe		(Area Code)	(Daytime Telephone Number)		
Enclosed is a check for the following amount made	de payable to the Florida	Department of	State:		
\$35 Filing Fee S43.75 Filing Fe Certificate of Sta	Certified Copy (Additional copy enclosed)	Certifi is Certifi	D Filing Fee icate of Status ied Copy is tional Copy is sed)		
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327	Ā D	treet Address mendment Secti Division of Corpo Lifton Building			

2661 Executive Center Circle Tallahassee, FL 32301



May 2, 2018

WILLIAM FOUTZ, SR. 6504 NORTH MERIDAN ROAD TALLAHASSEE, FL 32312

SUBJECT: INTER CIVIC COUNCIL, INC.

Ref. Number: 742869

We have received your document for INTER CIVIC COUNCIL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 318A00009033

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cur	months filed with the Fle	wide Dent of State)
742869	rently thed with the Fig	riua Dept. of State)
· · · · · · · · · · · · · · · · · · ·	umber of Corporation (if l	mown)
Pursuant to the provisions of section 617.1006, Florida Statement(s) to its Articles of Incorporation:	·	
A. If amending name, enter the new name of the corpo	oration:	<del>(</del>
THE INTER CIVIC COUNCIL OF THE SOUTHERN C	HRISTIAN LEADERSHI	P COUNCIL OF TALLAHASSE The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u> )	
C. Enter new mailing address, if applicable:		2.4
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		0
		<u> </u>
. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered offi	ce address:	智慧
Name of New Registered Agent: N/A		Sales.
	(F	lorida street address)
New Registered Office Address:		
N/A	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an		t the obligations of the position.
	<ul> <li>Signature of New Regis</li> </ul>	tered 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	PT John Doe  V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
Change Add Remove	Asst. Socsetary Baker, Cheryl	818 Millard Street Tallahossee, FL 32301
2) Change		
Add Remove 3) Change		
Add		
4) Change Add		
Remove  5) Change  Add		
Remove		
6) Change Add		
Remove	<b>D</b> A 44	

E. If amending or adding additional Arti (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
, 1, 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	· · · · · · · · · · · · · · · · · · ·
<del> </del>	

	e date of each amendmen e this document was signed		, if other than the
	ective date <u>if applicable</u> :	April 22, 2018	
		(no more than 90 days after amendment file date)	
		nis block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	t be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/was/were sufficient for a	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	April Dated	22, 2018	
	Signature	allem fond	<del></del>
	have	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	_	WILLIAM FOUTZ	
		(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	