753997

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Southwest Florida Archaeological Society, Inc.		
DOCUMENT NUMBER: 753997		
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Charles E. Strader		
(Name of Contact Perso	on)
· · · · · · · · · · · · · · · · · · ·	(Firm/ Company)	
27655 Kent Rd	(Address)	
Bonita Springs, FL 34135		
. (City/ State and Zip Coo	de)
swfas@explorationsinc.com E-mail address: (to be used	for future annual report	t notification)
For further information concerning this matter, please of	call:	
Charles Strader	at (239	, 992-9660
(Name of Contact Person)	(Area C	Tode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida Dep	partment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & I Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amer Divis Clifto	t Address Indiment Section Identification of Corporations In Building
Tallahassee, FL 32314	2661	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Southwest Florida Archaeological Society, Ind	0	2013 FEB 21 PM 1: 35
(Name of Corporation as currently filed with the F	lorida Dept. of State)	STATE
753997 ·		SHAFED STATE SHOWING STATE TALL AHASSEE, FLORID
(Document Number of Corpo	oration (if known)	1D
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For F</i>	= *
A. If amending name, enter the new name of the corpora	ation:	
N/A		The ne
name must be distinguishable and contain the word "corpor	cation" or "incorporated" (or the abbreviation "Corp." or "Inc
"Company" or "Co." may not be used in the name.	N/A	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		
		<u> </u>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
·		
N. If any all all all all all all all all all al		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 	<u>fice address in Florida, en</u> -address:	ter the name of the
Name of New Registered Agent: N/A		
nume of New Registerer agent.		
	(Florida street address)	
New Registered Office Address:		
		Florida
(Ciņ	•)	(Zip Code)
New Registered Agent's Signature, if changing Registere		
hereby accept the appointment as registered agent. I am f	familiar with and accept the	obligations of the position.
		,
Signature of New Reg.	istered 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: - <u>X</u> Change	<u>PT</u> .	John Doe	
X Remove	<u>V</u> .	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>V</u>	Alison Elgart	6667 Plantation Pines Blvd Fort Myers, FL 33966
2) X Change Add Remove	<u>s</u>	Katie Betz	2955 70th St SW Naples, FL 34105
Change Add Remove	D	Paul Backhouse	20680 Larino Loop Estero, FL 34928
4) X Change Add Remove	D	Maureen Mahoney	27468 Shriver Ave Bonita Springs, FL 34135
5) X Change Add Remove	D	James Oswald	79 Emerald Woods Dr J-10 Naples, FL 34108
6) X Change Add Remove	D	Melissa Timo	2366 East Mall Dr #410. Fort Myers, FL 33901

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE FIVE—PURPOSE
Said organization is organized exclusively for any charitable, religious, educational,
and scientific purposes, including, for such purposes, the making of distributions
to organizations that qualify as exempt organizations under Section 501(c)(3)
of the Internal Revenue Code, or corresponding section of any future federal tax code.
ARTICLE THIRTEEN—DISSOLUTION
Upon the dissolution of the corporation, assets shall be distributed for one or more
exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code,
or the corresponding section of any future federal tax code, or shall be distributed to the
federal government, or to a state or local government, for a public purpose. Any such
assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of
the county in which the principal office of the corporation is then located, exclusively for
such purposes or to such organization or organizations, as said Court shall determine,
which are organized and operated exclusively for such purposes.
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Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the amendment(s) al.
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated //	114/12
Signature 1	X M
hale not be	rman or vice mairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
Annette Snap	pp
	(Typed or printed name of person signing)
President	
	(Title of person signing)