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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	etion Stops Abuse, Inc. (CA	SA)	
757676 DOCUMENT NUMBER:		<u>-</u>	
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:		
Thomas Harry Linn			
	(Name of Contact Per	rson)	
Community Action Stops Abuse, Inc. (CASA)			
	(Firm/ Company)	)	
1011 1st Avenue North			
	(Address)		<del>-</del> · · · · · · · · · · · · · · · · · · ·
St. Petersburg, FL 33701			
	(City/ State and Zip C	ode)	
hlinn@casa-stpete.org			
E-mail address: (to b	be used for future annual repo	ort notification	1)
For further information concerning this matter.	please call:		
Jill Flansburg	at	727	895.4912
(Name of Contact			(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida D	epartment of	State:
\$35 Filing Fee \$43.75 Filing I Certificate of S	Fee & \$\Bigsiz\$\$ \$\\$43.75\$ Filing Fee & Certified Copy (Additional copy is enclosed)	Certit Certit	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amo Div	eet Address endment Sect ision of Corpo ton Building	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Community Action Stops Abuse, Inc.					
(Name of Corporation as current	ntly filed with the Florida	Dept. of State)			
757676					
(Document Num	ber of Corporation (if know	(m)			
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For P</i>	rofit Corporation adopts the following			
A. If amending name, enter the new name of the corporate	tion:				
Not Applicable	_	The new			
name must be distinguishable and contain the word "corpord "Company" or "Co," may not be used in the name.	ution" or "incorporated" (				
B. Enter new principal office address, if applicable:	Not Applicable				
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)				
	<del></del>	<u> </u>			
C. Enter new mailing address, if applicable:	Not Applicable	Sign of the second			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<del></del>			
		(1) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d			
		<u> </u>			
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:		ter the name of the			
	<del></del>				
Name of New Registered Agent: Not App	псавіе	<del> </del>			
<del></del>	(Florida street address)				
New Registered Office Address:					
		, Florida			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		obligations of the position.			
	Signature of New Registere	d 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>V</u> <u>Mik</u>	<u>i Doe</u> e Jones c Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Chief Ex	Lariana Forsythe	1011 1st Avenue North
X Add			St. Petersburg, FL 33701
Remove			
2) Change	Interim I	Suzanne Horn	1011 1st Avenue North
Add			St. Petersburg, FL 33701
X Remove			
3 ) Change	Chief Or	Suzanne Horn	1011 1st Avenue North
X Add			St. Petersburg, FL 33701
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N. A. P. H.	
Not Applicable	
	<del></del>

Tha do	ta of each amer	June 5, 2017 ndment(s) adoption:	if other than the
	s document was		If other than the
E Cantin	ve date <u>if appli</u>	June 5, 2017	
CHECK	e date <u>it appli</u>	(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will rate on the Department of State's records.	not be listed as the
Adopti	on of Amendm	ent(s) ( <u>CHECK ONE</u> )	
	ie amendment(s is/were sufficier	) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
		abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
	Dated	July 10, 2017	
	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)	
		Thomas Harry Linn	
		(Typed or printed name of person signing)	
		Chief Financial Officer	
		(Title of person signing)	