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		<u>COVER LET</u>	<u>TER</u>	
TO: Amendment Section Division of Corporations		4 5- 17		
NAME OF CORPORATION:	Gold Coast Down's S			
	572			
The enclosed Articles of Amend	Iment and fee are subn	nitted for filing.		
Please return all correspondence	concerning this matte	r to the following	:	
Anne Dichele				
		(Name of Contact	Person)	
Gold Coast Down's Syndrome	Organization, Inc.			
		(Firm/ Comp	any)	
915 S. Federal Highway				
		(Address))	
Boynton Beach, FL 33435				
		(City/ State and Z	ip Code)	
anne@goldcoastdownsyndrome	e.org			
E-ma	iil address: (to be used	for future annual	report notificatio	n)
For further information concern	ing this matter, please	call:		
Anne Dichele			561 at	752.3383
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	wing amount made pa	yable to the Florid	da Department of	State:
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)	Certi oy is Certi (Add	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee, F	ection prporations 7		Street Address Amendment Sect Division of Corp The Centre of T 2415 N. Monro Tallahassee, FL.	orations 'allahassee e Street, Suite 810

Articles of Amendr to Articles of Incorpor of				
Gold Coast Down's Syndrome Organization Inc.	, L	۰.	· ; _	S: 3
(Name of Corporation as currently filed with the Florida Dept. of State)		•	
763572				
(Document Number of Corpora	tion (if known)			
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florid</i> amendment(s) to its Articles of Incorporation:	la Not For Profit Co	orpora	<i>ition</i> adop	ots the following

A. If amending name, enter the new name of the corporation:

Gold Coast Down Syndrome Organization Inc.		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> .	<u>N/A</u>	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	
D. If amending the registered agent and/or registered on new registered agent and/or the new registered office		a, enter the name of the
<u>Name of New Registered Agent:</u> N/A		
<u>New Registered Office Address:</u>	(Florida street address)
<u>N/A</u>		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register		

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

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>X</u> Remove <u>X</u> Add	$\frac{\text{PT}}{\underline{V}}$	<u>John Doe</u> <u>Mike Jones</u> <u>Sally Smith</u>	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>N/A</u>		
Remove			
2) Change Add			
3) Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add	- 	<u> </u>	
Remove			
6) Change Add			
Remove		N 7 6 4	
		Page 2 of 4 <u>ional Articles, enter change(s) here</u> : vessury). (Be specific)	
N/A			

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The date of each amendment(s) adoption:	February 10, 2020	 , if other than the
date this document was signed.		

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption 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.

Dated	March 9, 2020
Signature	En NAM
	(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)
	Erin Allen

(Typed or printed name of person signing)

President, Board of Directors

•••••

(Title of person signing)

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