765349

(Re	equestor's Name)	 		
(Ad	idress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Habitat for Humanity of Lee and Handry Counties, I
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tohn O'Donnell (Name of Contact Person)
Habitat for Humanity of Lee and Hendry Counties, Inc.
1388 N. Tamiani, Trail (Address)
North Fr. Myers, FC 33903 (City/ State and Zip Code)
John Ochabitat 4 homanity org E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Total O' Doorse (1 at 331 - 650 - 167) (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section

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



September 21, 2018

JOHN O'DONNELL HABITAT FOR HUMANITY 1288 N. TAMIAMI TRAIL NORTH FT. MYERS, FL 33903

SUBJECT: HABITAT FOR HUMANITY OF LEE AND HENDRY COUNTIES, INC.

Ref. Number: 765349

We have received your document for HABITAT FOR HUMANITY OF LEE AND HENDRY COUNTIES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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: 118A00019776



September 12, 2018

JOHN O'DONNELL HABITAT FOR HUMANITY 1288 N. TAMIAMI TRAIL NORTH FORT MYERS, FL 33903

SUBJECT: HABITAT FOR HUMANITY OF LEE AND HENDRY COUNTIES, INC.

Ref. Number: 765349

We have received your document for HABITAT FOR HUMANITY OF LEE AND HENDRY COUNTIES, INC. and your check(s) totaling \$43.75. 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

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Letter Number: 618A00018969

Articles of Amendment to Articles of Incorporation of

y filed with the Floris	da Dept. of State)
	
of Corporation (if known	own)
this Florida Not For	Profit Corporation adopts the following
<u>n:</u>	
	The new
n" or "incorporated"	" or the abbreviation "Corp." or "Inc."
- · ·	
	- B
	741 TO
	<u></u>
	(B)
address in Florida, e dress:	enter the name of the
(Flo	rida street address)
	. Florida
(City)	(Zip Code)
gent:	(21p Code) he obligations of the position.
gent:	
	address in Florida, odress:

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>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>V</u>	Tanya Soholt	1288 N. Tamiami Trail North Ft. Myers, FL 35103
2) Change		Rick Meicer	Dorth Ft. Myris, FL 33903
3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add			
Damasa			

ttach additional sheets, if necessary).	(Be specific)					
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The date of each amendment(s) add date this document was signed.	ption:	9/28/2018	, if other than the
Effective date <u>if applicable</u> :			
	(no more than 90 day	vs after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep			nis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were add was/were sufficient for approval		the number of votes cast for the am	endment(s)
There are no members or member adopted by the board of director		imendment(s). The amendment(s) v	vas/were
Dated	9-28,-18		
Signature	2 When		
have not beer		e board, president or other officer-if tor – if in the hands of a receiver, tr fiduciary)	
Joi	na O'Donnell		
	(Typed or pri	inted name of person signing)	
_CFO	IVP of Finance	Title of person signing)	
	I	TRIC OF DETSON STRRING)	