# 766522

(Requestor's N	lame)
(Address)	
(Address)	
(City/State/Zip/	(Phone #)
	IT MAIL
(Business Enti	ty Name)
(Document Nu	mber)
Certified Copies Certi	ficates of Status
Special Instructions to Filing Office	er:
Office U	se Only



ا ا

TALLARY OF STATE

• • • •

COVER	<u>LETTER</u>
TO: Amendment Section Division of Corporations	
Florida Association for Women I NAME OF CORPORATION:	Lawyers, Inc.
766522 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for fil	ing.
Please return all correspondence concerning this matter to the follo	owing:
Kari Hicks, Executive Director	
(Name of C	Contact Person)
Florida Association for Women Lawyers	
(Firm/)	Company)
PO Box 721264	
(Ac	ldress)
Orlando, FL 32872	
(City/ State	and Zip Code)
admin@fawl.org	
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter, please call:	
Kari Hicks	321 439-1264
(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 □\$43.75 Filing Fee & □\$43.75 Fi Certificate of Status Certified (Addition enclosed)	Copy Certificate of Status al copy is Certified Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314	<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

· ·

. •

#### Articles of Amendment to Articles of Incorporation of

.

Florida Association for Women Lawyers, Inc.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

766522

٠

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporat	ton:	
n/a		The new
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbre	viation "Corp." or "Inc."
<b>B.</b> <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	n/a )	
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 offi	ce address in Florida, enter the nar	ne of the
new registered agent and/or the new registered office a	ddress:	محمور لأناب
<u>Name of New Registered Agent:</u>		
<u>New Registered Office Address</u> :	(Flortda street addre	STATE
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered 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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeheld. 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	<u>PT</u> <u>John I</u> <u>V</u> <u>Mike</u> <u>SV</u> Sally S	Jones	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) <u>×                                    </u>	<u>P</u>	Jenny Scavino Sieg	2945 Defuniak Street Trinity, FL 34655
Remove 2) <u>×</u> Change Add	<u>VP</u>	Donna L. Eng	1000 SE Monterev Commons Bivd Ste 306
3 ) Remove 3 ) Change <u>x</u> Add Remove	<u>s</u>	Jessica D. Thomas	Stuart, FL 34996 166 Lookout Place Suite 200 Maitland, FL 32751
4) Change Add	<u>T</u>	Mariane L. Dorris	121 S. Orange Ave Ste 1120 Orlando, FL 32801
	<u>P</u>	Kimberly Hosley	12301 Lake Underhill Rd Ste 213 Orlando, FL 32838
x         Remove           6)         Change           Add	<u>s</u>	Kristina Feher	1275 66th Street N. #40042
X Remove			St. Petersburg, Florida 33743

### E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

n/a

	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		· · · · · · · · · · · · · · · · · · ·
- <u></u>		
The date of each amendment(s) adoption: _		, if other than the
date this document was signed.		

Effective date if applicable:

(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.

	8/10/2021
Dated	
Signature	. Kan Hicks
с <sup>.</sup>	(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)
	· ·

Kari Hicks

· ,

(Typed or printed name of person signing)

.

Executive Director

(Title of person signing)