766522

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COVER LETTER

TO: Amendment Section Division of Corporations

Florida NAME OF CORPORATION:	Association for Women L	awyers Inc	
766522 DOCUMENT NUMBER:			
The enclosed Articles of Amendment an			
Please return all correspondence concerr	ing this matter to the follo	wing:	
Kari Hicks			
	(Name of Co	ontact Person)	
Florida Association for Women Lawyers	s		
	(Firm/ C	Company)	
622 S Deerwood Avenue			
. <u>_</u> .	(Add	dress)	
Orlando, FL 32825			
	(City/ State a	and Zip Code)	
admin@fawl.org			
E-mail addres	s; (to be used for future ar	inual report notification	on)
For further information concerning this r	natter, please call:		
Kari Hicks		321 at	439-1264
(Name of Co	ontact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable to the	Florida Department o	f State:
■ \$35 Filing Fee □\$43.75 F Certifica	iling Fee & S43.75 Fil te of Status Certified (Additional enclosed)	Copy Certi al copy is Certi (Add	50 Filing Fee ficate of Status ified Copy litional Copy is losed)
Mailing Address Amendment Section		Street Address Amendment Sec	ction .

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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 Flor	rida Dept. of State)	
766522), N
(Document N	lumber of Corporation (if know	
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For P	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
n/a		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" e	
B. Enter new principal office address, if applicable:	n/a	
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
	· 	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	n/a 	
	 	
D. If amending the registered agent and/or registered		ter the name of the
new registered agent and/or the new registered of	fice address:	
Name of New Registered Ayeni:		
	(Floria	a street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		obligations of the position.
		•
	Signature of New Registered	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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>P</u>	Donna L. Eng	1000 SE Monterey Commons Blvd Ste 306
Remove			Stuart, FL 34996-334
2) Change Add	P	Jenny Scavino Sieg	2945 Defuniak Street Trinity, FL 34655
X Remove 3) Change Add X Remove	<u>T</u>	Mariane L Dorris	Suite 1120 Orlando, FL 32801
4) Change Add	T	Jennifer Gutai Comella	35008 Emerald Coast Pkwy 5th Floor
Remove			Destin, Florida 32541
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
n/a	· ·		
	- .		

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	to the second
The date of each amendment(s) adoption:	. if other than the
une une unem rue signed.	
Effective date if applicable: (no more than 90 days after amendment	
(no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing	g requirements, this date will not be listed as the
document's effective date on the Department of State's records.	•

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

D	9/19/2022 ated
17	War I loka
Si	ignature 1 (MM + 1708)
	(By the chairman or vice chairman of the board, president or other officer-if director
	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)

(Title of person signing)