768913

| (Requ | uestor's Name) | | |
|---|-----------------|-----------|--|
| (Addı | ress) | | |
| lbbA) | ress) | ····· | |
| (City/ | State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Busi | ness Entity Nan | ne) | |
| (Doc | ument Number) | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
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SECRETARIST FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: <u>National</u> | Association of Women In Construction, Southwest Florida Chapter 297, Inc. |
|--|--|
| DOCUMENT NUMBER: 768913 | |
| The enclosed Articles of Amendment and | fee are submitted for filing. |
| Please return all correspondence concernir | ng this matter to the following: |
| | Kathy Burton |
| | (Name of Contact Person) |
| | NAWIC SWFL Chapter 297 |
| | (Firm/ Company) |
| | 231 5th Street Northwest |
| | (Address) |
| | Naples, Fl. 34120 |
| | (City/ State and Zip Code) |
| | nawic297@gmail.com |
| E-mail address: | (to be used for future annual report notification) |
| For further information concerning this ma | atter, please call: |
| Kathy Burton | at 918-625-9105 |
| (Name of Cor | stact Person) (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amo | unt made payable to the Florida Department of State: |
| | ling Fee & Substituting Fee & Substituting Fee & Certificate of Status (Additional copy is enclosed) Substituting Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Street Address Amendment Section Division of Corporations Clifton Building |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| National Association Of Women in Construction Sou (Name of Corporation as cur | thwest Florida Chapter 297, Inc. rently filed with the Florida Dep | |
|---|---|----------------------------------|
| 768913 | . | |
| | umber of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation: | atutes, this Florida Not For Profit | Corporation adopts the following |
| A. If amending name, enter the new name of the corpo | ration: | |
| | | The new |
| name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name. | oration" or "incorporated" or the | abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | 231 5th Street Northwest | |
| (Principal office address MUST BE A STREET ADDRE | <u>SS</u>) Naples, Fl. 34120 | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | 231 5th Street Northwest | - |
| | Naples, Fl. 34120 | 55 T |
| | | |
| | | <u></u> |
| D. If amending the registered agent and/or registered of | office address in Florida, enter th | he name of the |
| new registered agent and/or the new registered office | ce address: | · . |
| Name of New Registered Agent: | Kathy Burton | ···· |
| | 231 5th Street Northwes | s t |
| None Business of Office 1111 | (Florida stree | et address) |
| New Registered Office Address: | Newton | |
| | Naples | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Register | red Agent: | |
| I hereby accept the appointment as registered agent. I an | n familiar with and accept the obli | gations of the position. |
| , | Kather Ku | In |
| | Signature of New Registered Ag | ent, 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>Mi</u> | on Doe ke Jones ly Smith | |
|----------------------------------|--------------------|--------------------------------|----------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | Р | Kami Sue Ward | P O Box 07422 |
| Add | | | Fort Myers, Fl. 33919-5835 |
| X Remove | | | |
| 2) Change | | Abigail Price Trapnell | P O Box 07422 |
| Add | | | Fort Myers, Fi. 33919-5835 |
| XRemove | | | |
| 3) Change | <u>s</u> | Alene Garlick | P O Box 07422 |
| Add | | | Fort Myers, Fl. 33919-5835 |
| XRemove | | | - |
| 4) Change | <u> </u> | Lisa Betz | P O Box 07422 |
| Add | | | Fort Myers, Fl. 33919-5835 |
| X Remove | | | |
| 5) Change | <u>D</u> | Becki Myers | P O Box 07422 |
| Add | | | Fort Myers, Fl. 33919-5835 |
| X Remove | | | |
| 6) Change | _ <u>D</u> | Misty Day Gillam | P O Box 07422 |
| Add | | | Fort Myers, Fl. 33919-5835 |
| X_ Remove | | | |

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>Mi</u> | in <u>Doe</u> ke Jones l <u>v Smith</u> | |
|----------------------------------|--------------------|---|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| Change Add X Remove | D | Giselle Moreira-Leite | P O Box 07422 Fort Myers, Fl. 33919-5835 |
| 2) Change X Add | Р | Giselle Rattis | 231 5th Street Northwest Naples, Fl. 34120 |
| Remove 3) Change X Add | <u>T</u> | Kathy Burton | 231 5th Street Northwest Naples, Fl. 34120 |
| Remove 4) Change X Add Remove | <u>D</u> | Marilyn Santiago | 231 5th Street Northwest Naples, Fl. 34120 |
| 5) Change | | | |
| Remove 6) Change Add Remove | | | |

| If amending or adding addition attach additional sheets, if necess | san). (Be specific, |) | | | |
|--|---------------------|-------------|-------------|------------------|-------------|
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| The date of each amendment(s) adoption: OCTODER 10, 2017) date this document was signed. | , if other than the |
|--|-------------------------------------|
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the members and the number of votes cast for the artwas were sufficient for approval. | nendmeni(s) |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors. | was/were |
| Dated October 19, 2017 | |
| Signature | _ |
| (By the chairman or vice chairman of the board, president or other officer- have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiductary by that fiduciary) | if directors trustee, or |
| Kathy Burton | |
| (Typed or printed name of person signing) | |
| Chapter Treasurer | |
| (Title of person signing) | |