

F21000000400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** Supporting Success for Children with Hearing Loss

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F21000000400

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alice B. Wellen

\_\_\_\_\_  
Name of Contact Person

Supporting Success for Children with Hearing Loss

\_\_\_\_\_  
Firm/Company

12094 Anderson Road, Suite 347

\_\_\_\_\_  
Address

Tampa, FL 33625

\_\_\_\_\_  
City/State and Zip Code

brenda@success4kidswhl.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Anderson

at ( 850 ) 363-9909

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F21000000400

(Document number of corporation (if known))

1. Supporting Success for Children with Hearing Loss, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Texas

3. 01/21/2021

(Incorporated under laws of)

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Alice B. Wellen

12094 Anderson Road, Suite 347

(Florida street address)

New Registered Office Address: Tampa, Florida 33625

(City)

(Zip Code)

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

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

\_\_\_\_\_  
Signature of New Registered Agent, if changing

*Alice B. Wellen*

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STATE

**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:**

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)                 | Title     | Name                   | Address                       |
|---|-----------|------------------------|-------------------------------|
| 1) <input checked="" type="checkbox"/> Change | <u>DV</u> | <u>Alice B Wellen</u>  | <u>2703 Shamrock Drive</u>    |
| <input type="checkbox"/> Add                  |           |                        | <u>San Angelo, TX 76904</u>   |
| <input type="checkbox"/> Remove               |           |                        |                               |
| 2) <input type="checkbox"/> Change            | <u>DP</u> | <u>Alice B. Wellen</u> | <u>2703 Shamrock Drive</u>    |
| <input checked="" type="checkbox"/> Add       |           |                        | <u>San Angelo, TX 76904</u>   |
| <input type="checkbox"/> Remove               |           |                        |                               |
| 3) <input checked="" type="checkbox"/> Change | <u>DP</u> | <u>Karen Anderson</u>  | <u>3418 Laurel Dale Drive</u> |
| <input type="checkbox"/> Add                  |           |                        | <u>Tampa, FL 33618</u>        |
| <input type="checkbox"/> Remove               |           |                        |                               |
| 4) <input type="checkbox"/> Change            | <u>S</u>  | <u>Karen Anderson</u>  | <u>3418 Laurel Dale Drive</u> |
| <input checked="" type="checkbox"/> Add       |           |                        | <u>Tampa, FL 33618</u>        |
| <input type="checkbox"/> Remove               |           |                        |                               |
| 5) <input type="checkbox"/> Change            | <u>S</u>  | <u>Lois Kostroski</u>  | <u>6022 Williamsburg Way</u>  |
| <input type="checkbox"/> Add                  |           |                        | <u>Tampa, FL 33624</u>        |
| <input checked="" type="checkbox"/> Remove    |           |                        |                               |
| 6) <input type="checkbox"/> Change            | <u>V</u>  | <u>Michelle Andros</u> | <u>503 Seminole St</u>        |
| <input checked="" type="checkbox"/> Add       |           |                        | <u>Irwin, PA 15642</u>        |
| <input type="checkbox"/> Remove               |           |                        |                               |

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

*(Attach additional sheets, if necessary). (Be specific)*

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Add VT Therese Urban 16045 Old Ridge Road, Montpelier VA 23192

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Board of Directors

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Alice B. Wellen, President/Director

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Michelle Andros, Vice President

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Therese Urban, Vice President/Treasurer

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Karen Anderson, Secretary

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

Business share ownership: Alice Wellen 49%, Michelle Andros 20%, Therese Urban 20%, Karen Anderson 11%

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Base of operations is still Tampa Florida.

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

Effective date if applicable: Upon receipt of this signed document  
(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, 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by all 4 members of the Board of Directors  
\_\_\_\_\_  
(voting group)"

Dated January 27, 2023 \_\_\_\_\_

Signature Alice B. Wellen  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Alice B. Wellen

\_\_\_\_\_  
(Typed or printed name of person signing)

President/Director of Supporting Success for Children with Hearing Loss

\_\_\_\_\_  
(Title of person signing)