NO200001976

	Ì
(Requestor's Name)	İ
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



300306755883

12/20/17--01018--028 **85.00

DEC 2 1 2017 S. YOUNG TALLAMAS SEET FLURIDA

' COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	velopment Corporation	.	
DOCUMENT NUMBER:		 	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Jihad S. Rashid			
	(Name of Contact Per	rson)	
Collaborative Development Corporation			
	(Firm/ Company))	
3628 Grand Avenue			
	(Address)		
Coconut Grove, FL 33133			
	(City/ State and Zip C	lode)	
jsrashid@ede-florida.org			
E-mail address: (to be u	sed for future annual repo	ort notification	on)
For further information concerning this matter, plea	ase call:		
J.S. Rashid	at _	305	446-5150
(Name of Contact Pers		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	epartment o	f State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& □\$43.75 Filing Fee & as Certified Copy (Additional copy is enclosed)	Cert Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address endment Sec vision of Corp fton Building	porations

2661 Executive Center Circle

Tallahassee, Ft. 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as c	currently fi	led with the	Florida Dept	t. of State)		
Collaborative Development Corporation	0200	00019	76			
(Document	Number of	Corporation	(if known)			
Pursuant to the provisions of section 617.1006. Florida Samendment(s) to its Articles of Incorporation:	Statutes, thi	s <i>Florida Ne</i>	ot For Profit C	Corporation ado	pts the fo	llowing
A. If amending name, enter the new name of the cor	porațion:	,				
			/A			he new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation"	or "invorpo	rated" or the	abbreviation "C	Corp." or	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDE	RESS)		V/A			
						
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>.</u>	\wedge	//A		1	
	_					330
		_			() ()	20
D. If amending the registered agent and/or registere		drace in Fla	rido antor th	e name of the	-711 -711	孟
new registered agent and/or the new registered o			rida, enter tii	e name or the	Ģ.	යන
Name of New Registered Agent:		<u> N//</u>	<u> </u>		<u> </u>	09
	<u>-</u> .		(Florida stree	rt address)		<u>_</u>
New Registered Office Address:						
				Florida _	<u>.</u>	
	(C	lity)			ode)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I			ecept the oblig	zations of the po	sition.	
	Signat	ure of New I	Registered Age	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>Doe</u> Jones <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	Jacquin Gilehrist	2525 Ponce de Leon Blvd. #300
Add			Coral Gables, FL 33134
XRemove			
2) Change	D	Crystel Lewis	Miami Dade College
Add			627 SW 27 Avenue
X Remove			Miami, FL 33135
3) Change			
, Add			
Remove			
			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)				
	N/A				
	N/P	·			
	_				
					
		-, <u>-</u> ,			
			_ 		-
		.			
					
					
	······································				
				<u>. </u>	

The	date of each amendment	12-08-2017	, if other than the
	this document was signed		
F ff	ective date <u>if applicable</u> :	12-08-2017	
1,11	естус часе <u>и арунсати</u> .	(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the
Add	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	Signature (By the have to other to	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed tiduciary by that fiduciary) ad S. Rashid	
		(Typed or printed name of person signing)	
	Pre	esident & CEO	
		(Title of person signing)	