N0200005071

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

LEER ON AM IO.

FEB 21 2014 C. CARROTHERS

COVER LETTER

Division of Corporations Broward Alliance for Neighborhood Development, Inc. N02000005077 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bonnye Deese (Executive Director) (Name of Contact Person) Broward Alliance for Neighborhood Development, Inc. (BAND) (Firm/ Company) 3625 W Broward Blvd. Suite 110 (Address) Lauderhill, FL 33312 (City/ State and Zip Code) bdeese@bandflorida.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bonnye Deese (Name of Contact Person) 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 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

14 FEB 20 AM 10: 09

Broward Alliance for Neighborhood Development, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLORIDA

	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section mendment(s) to its Articles of Inco		utes, this Florida Not For Profit Corporat	tion adopts the fol
. If amending name, enter the n	ew name of the corpor	ation:	
N/A			T
ame must be distinguishable and c Company" or "Co." may not be u		ration" or "incorporated" or the abbrevia	
. Enter new principal office add	nega if annlicables	N/A	
rincipal office address <u>MUST BI</u>		<u>S</u>)	
Enter new mailing address, if (Mailing address MAY BE A Po		N/A	
. If amending the registered age	nt and/or registered of	ffice address in Florida, enter the name o	of the
. If amending the registered age new registered agent and/or th		ffice address in Florida, enter the name o	of the
	ne new registered office		of the
new registered agent and/or th	ne new registered office	e address:	of the
new registered agent and/or th	ne new registered office gent: N/A		of the
new registered agent and/or the	ne new registered office gent: N/A	e address:	of the

Page 1 of 4

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	PT John I V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	D	William Charland	2210 NW 3rd. Ave
Add			# B3
Remove			Pompano Beach FL 33060
2) Change			
Add			
Remove			
3) Change	 		•
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Chamas			
6) Change			
Add			-
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A					
		<u> </u>			
	·				
,					

Γhe	date of each amendmen	t(s) adoption: N/A	, if other than
	e this document was signed ective date <u>if applicable</u> :	N/A	
		(no more than 90 days after amendment file date)	_
\d c	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 2/1	4/14	
	Signature	M WILCELL	<u></u>
	have r	e 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 fiduciary by that fiduciary)	
	Bonny	ve Deese	
		(Typed or printed name of person signing)	
	Execu	tive Director	
	····	(Title of person signing)	

14 FEB 20 AM IO: 09
SECRETARY OF STATE

the