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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Collier County Women's Bar Association, Inc.

DOCUMENT NUMBER: N03000005923

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

S. Kyla Thomson  
(Name of Contact Person)

Varnum, LLP  
(Firm/ Company)

999 Vanderbilt Beach Road, Suite 300  
(Address)

Naples, FL 34108  
(City/ State and Zip Code)

skthomson@varnumlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

S. Kyla Thomson at 239 373-8027  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

Collier County Women's Bar Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N03000005923

(Document Number of Corporation (if known))

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Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

N/A

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

N/A

(Mailing address MAY BE A POST OFFICE BOX)

**D. 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: N/A

New Registered Office Address:

(Florida street address)

(City)

Florida

(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*

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:

resident vice president T Treasurer S Secretary irector TR Trustee C Chairman or Clerk C O Chief Executive Officer CFO Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. resident, Treasurer, irector would be T .

Changes should be noted in the following manner. Currently John Doe is listed as the ST and Mike Jones is listed as the . There is a change, Mike Jones leaves the corporation, Sally Smith is named the and S. These should be noted as John Doe, T as a Change, Mike Jones, as Remove, and Sally Smith, S as an Add.

Example:

<input type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>—</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>S</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

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

(attach additional sheets, if necessary). (be specific)

Please see attached document.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3/8/24

Signature Christyna Torrez  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Christyna Torrez

(Typed or printed name of person signing)

President

(Title of person signing)

**Collier County Women's Bar Association, Inc.**

Amendment to Articles of Incorporation

Additions are underlined.

Deletions are ~~stricken through~~.

**Article II**  
**Operation**

~~The Corporation shall operate as a chapter of the Florida Association for Women Lawyers, Inc., a Florida not for profit corporation.~~ This Article shall be reserved for future purposes.