## NO300007375

(Re	equestor's Name)	
(Ad	(dress)	
(Ad	idress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<u></u>		

Office Use Only



900071426329

04/24/06--01023--010 \*\*35.00

DIVISION OF CORPORATIONS

R 5/4/000



April 27, 2006

JOY CHEATHAM GLOBAL REACH FOUNDATION, INC. P O BOX 93498 LAKELAND, FL 33804

SUBJECT: LAFAYETTE COUNTY COMMUNITY DEVELOPMENT FINANCIAL

INSTITUTION, INC.

Ref. Number: N03000007375

We have received your document for LAFAYETTE COUNTY COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith Document Specialist

Letter Number: 006A00029244

LANGE WITHOUT STATE

## **COVER LETTER**

• TO: Amendment Section
Division of Corporations

NAME OF CORPORATION. Converto Tounty Owners W. Decolor of
NAME OF CORPORATION: Lafa yothe County Community Development Financial Institution The
DOCUMENT NUMBER: NO 3000007375
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Global Reach Formatter Inc. (Firm/ Company)
PO BOX 93498 (Address)
Lakelana, F1. 33804  (City/ State and Zip Code)
For further information concerning this matter, please call:
Joy Cheathanat (\$6.3 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Enclosed is a check for the following amount: a live a dy recitived.
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## Articles of Amendment to · Articles of Incorporation

Financial Institution, Inc. (Name of corporation as currently filed with the Florida Dept. of State) 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: NEW CORPORATE NAME (if changing): (must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation) AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

The date of adoption of the amendment(s) was: $4/10/2006$
Effective date if applicable: 4/10/2006  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was (were) adopted by the members and the number of votes cas for the amendment was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature
(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.)
Typed or printed name of person signing)
Dresident (Title of person signing)

FILING FEE: \$35