

NO30000010779

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*Name  
Change  
Amend*

RECEIVED  
07 APR -9 AM 11:02  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 APR -9 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*AdR  
4/9/07*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Big Bend Center for Human Service Lifeline Inc

**DOCUMENT NUMBER:** WD3000010779

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

Please return all correspondence concerning this matter to the following:

Glenn Simmions  
(Name of Contact Person)

Big Bend Center for Human Service Lifeline Inc  
(Firm/ Company)

2109 Evergreen Dr  
(Address)

Tall H. 32304  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Glenn Simmions at (850) 590-5969  
(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 (Additional copy is enclosed)    ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

**Mailing Address**

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

07 APR -9 AM 11:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Document number of corporation (if known))

## HIV/AIDS Human Lifeline, INC (HAHL)

(Attach additional pages if necessary)  
(continued)

The date of adoption of the amendment(s) was:

4/9/2007

Effective date if applicable:

(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 cast 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

Glenn Simmons

(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.)

Glenn Simmons

(Typed or printed name of person signing)

Executive Director

(Title of person signing)

**FILING FEE: \$35**