## N0400000590

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ien's Refue of St Johns	County		
N0400000 DOCUMENT NUMBER:	00590			
The enclosed Articles of Amendment	and fee are submitted	for filing.		
Please return all correspondence conce	erning this matter to the	e following:		
Debbie Morales				
	(Name	of Contact Per	son)	
Women's Refuge of St Johns County				
	(F	irm/ Company)		
5237 Big Oak Road South				
		(Address)		
St Augustine, Fl 32095				
	(City/	State and Zip Co	ode)	
debbie@womensrefugeofstjo.com				
E-mail add	ress: (to be used for fu	ture annual repo	rt notification	)
For further information concerning thi	s matter, please call:			
Debbie Morales		at	)04	460-3762
(Name of	Contact Person)	(	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	imount made payable (	to the Florida De	epartment of !	State:
	(Ade	75 Filing Fee & ified Copy ditional copy is losed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Stre	et Address	

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

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

	<b></b>	A: 2
Women's Refuge of St Johns County		
(Name of Corporation as currently filed with th	e Florida Dept. of State)	
N04000000590		
(Docur	nent Number of Corporation (if kno	wn)
	rida Statutes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of th	e corporation:	
N/A		The new
"Company" or "Co." may not be used in the nam		
B. Enter new principal office address, if applica	<u></u>	
(Principal office address <u>MUST BE A STREET A</u>	(IDDRESS)	
	<del></del>	
C. Fatanaman Wang Adama (familian)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX) N/A	
,		
	<del></del>	
<ul> <li>If amending the registered agent and/or registered agent and/or the new register</li> </ul>		iter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:		<del></del>
N. D	(Flori	da street address)
New Registered Office Address:	NV.	
	N/A	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing l	Registered Agent:	
		e obligations of the position.
	(Document Number of Corporation (if known)  06, Florida Statutes, this Florida Not For Profit Corporation adopts the following in:  The new be word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." in an	
_	Signature of New Registere	ed 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:

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 De           V         Mike Jo           SV         Sally Se	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add X Remove	<u>vs</u>	Katherine Sanchez	325 Downs Corner Rd St Auustine, Fl 32092
2) Change Add	BOD	Tiffany Peacock	364 Tirana Avenuc St Augustine, Fl 32084
Remove 3 ) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove  6) Change Add			
E. If amending or adding (attach additional sheet	g additional Artic s. if necessary).	cles, enter change(s) here: (Be specific)	

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The date of each amendmen	t(s) adoption:	24			, if other than the
date this document was signed	l				
Effactive date if applicables	05/07/2024				
Effective date <u>if applicable</u> :	(no more th	an 90 days after a	mendment file d	late)	
Note: If the date inserted in the document's effective date on the	his block does not meet the Department of State	the applicable stat 's records.	utory filing requ	irements, this date will	not be listed as the

(CHECK ONE)

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

Adoption of Amendment(s)

ALL TRUSSEL FIG TO

Dated	07/01/2024
ignatu	re Min Million
	(By the chairman or viee 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)
	Debbie Morales
	(Typed or printed name of person signing)
	Executive Director
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.