

ND40000001207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

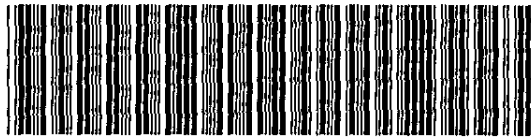
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/28/04
NIC Amend
Sg

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: FRIENDS OF ST. MARY'S JACKSONVILLE, INC.

DOCUMENT NUMBER: N04000001207

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

Please return all correspondence concerning this matter to the following:

SAMANTHA LIVINGSTON

(Name of Contact Person)

LIVINGSTONCPA, INC.

(Firm/ Company)

1335 LAKEWOOD ROAD

(Address)

JACKSONVILLE, FL 32207

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

SAMANTHA LIVINGSTON

(Name of Contact Person)

at (904) 887-7519

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 17, 2004

SAMANTHA LIVINGSTON
LIVINGSTONCPA, INC.
1335 LAKEWOOD ROAD
JACKSONVILLE, FL 32207

SUBJECT: FRIENDS OF ST. MARY'S JACKSONVILLE, INC.
Ref. Number: N04000001207

We have received your document for FRIENDS OF ST. MARY'S JACKSONVILLE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 104A00070411

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(pt. of State)

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

(Document number of corporation (if known))

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)**

(continued)

The date of adoption of the amendment(s) was: 12/14/2004

Effective date if applicable: _____
(no more than 90 days after amendment file date)

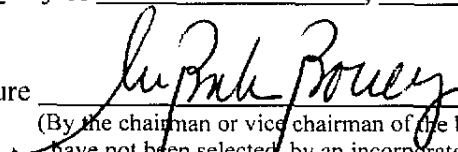
Adoption of Amendment(s) **(CHECK ONE)**

☐ 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.

Signed this 14th day of December, 2004.

Signature


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

Ann Baker Boney

(Typed or printed name of person signing)

Board of Directors, Chairperson

(Title of person signing)

FILING FEE: \$35