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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Plymouth Communi	ity Improvement, Inc			·
N04000004-304 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matte	er to the following:			
Gladys F. Bell				
	(Name of Contact Pers	on)		
Plymouth Community Improvement, Inc.				
	(Firm/ Company)			
P.O. Box 347				
	(Address)			<u> </u>
Plymouth, FL 32768				
-	(City/ State and Zip Co	ode)		
gbell58@cfl.rr.com				က် အမြဲ
E-mail address: (to be used	for future annual repor	t notification)	- 3 73
For further information concerning this matter, please	call:			AHIO: 49
Gladys F. Bell	4 at	07	923-0957	e Number)
(Name of Contact Person			(Daytime Telephon	e Number)
Enclosed is a check for the following amount made pa	ayable to the Florida De	partment of S	tate:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)	

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



October 17, 2019

(らら) GLAYDS F. BELL PLYMOUTH COMMUNITY IMPROVEMENT, INC P.O. BOX 347 PLYMOUTH, FL 32768

SUBJECT: PLYMOUTH COMMUNITY IMPROVEMENT, INC.

Ref. Number: N04000004304

We have received your document for PLYMOUTH COMMUNITY IMPROVEMENT, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to our records the name of your corporation is Plymouth Community Improvement, Inc. so the <u>name_change_doesn't need</u> to be included in this_amendment. Please make the appropriate changes and return to our office for processing.

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) 245-6050.

Letter Number: 319A00021427

Diane Cushing
Senior Section Administrator

Articles of Incorporation of

_	Plymouth Community Improvement, Inc.							_	
NΩ	(<u>Name of Corporation</u>)400004304	as current	ly filed w	ith the Fi	orida Dept	. of State)			
_								_	
	(Docum	ent Numbe	r of Corp	oration (if	known)				
	suant to the provisions of section 617.1006, Flor endment(s) to its Articles of Incorporation:	ida Statute:	s, this <i>Flo</i>	orida Not .	For Profit (Corporatio	n adopts the	: follow	/ing
A.	If amending name, enter the new name of the	corporat	ion:						
								The r	new
	ne must be distinguishable and contain the word ompany" or "Co." may not be used in the name		on" or "	incorpora	ted" or the	abbreviati	on "Corp."		
В.	Enter new principal office address, if applica	ble:							
(Pi	rincipal office address <u>MUST BE A STREET A</u>	DDRESS)							٠. ن
						<u>-</u>		1.63	<u></u>
								—————————————————————————————————————	<u>-912</u>
C.	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	ROY)						29	- 14.2 14.2
	(maing dairess MAT BEATOST OFFICE E	<u>10 x</u>)						ī	
								<u> 5</u>	
								۵.	S * 011
D.	If amending the registered agent and/or registered agent and/or the new register			s in Flori	da, enter t	he name o	<u>f the</u>		U)
	Name of New Registered Agent: Glady	F. Bell							
	1248 F	lermit Sm	ith Rd.						
	<u>New Registered Office Address:</u>				(Florida stree	et address)			
		Apopka							
			(City)				. <u>32712 </u>		—
			(0.13)			12	up coue,		
	w Registered Agent's Signature, if changing R			. ,					
i n	ereby accept the appointment as registered agent	. Tam fan	den	and acce	ppi the oblig	ations of t	he position.		
		Sig	nature	New Reg	istered Age	nt, if chang	zing		

Page 1 of 4

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.

Example: X_Change X_Remove X_Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	P	Rev. Henry Washington	Deceased
2) Change Add X	Р	Roosevelt Nichols	Deceased
A Remove 3) Change Add X Remove	<u>P</u>	Arthur Monroe	850 Hermit Smith Rd. Apopka, FL 32712
4) Change Add X Remove	<u>P</u>	Eddie Hines	7062 Holly St. Zellwood, FL 32798
5) Change Add X Remove	Р	Wilburt Marshall	Deceased
6) Change Add X Remove	P	Caprice Avery	3362 Janet St. Apopka, FL 32712

(Attach additional sheets, if necessary)

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Example: X Change X Remove X Add	<u>v</u> <u>n</u>	ohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Marcia L. Clark	3362 Janet St.
Add			Apopka, FL 32712
X Remove			
2) Change	F	Ola Mac Jones	P.O. Box 184
Add			Plymouth, FL 32768
X Remove			
3) Change	<u>T</u>	Thomas McCrary	Deceased
Add			
X Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

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Example: X. Change X. Remove X. Add	<u>V</u> <u>Mil</u>	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Namc</u>	<u>Addres</u> s
1) Change	P	Gladys F. Bell	1248 Hermit Smith Rd.
X Add			Apopka, FL 32712
Remove			P.O. Box 42-Plymouth, FL 32768
2) Change	<u>s</u>	Ruby Monroe	850 Hermit Smith Rd.
X Add			Apopka, FL 32712
Remove	F	Johnnie May Subbs	2644 Plymouth-Sorrento Rd.
3) Change		- Johnste Way Subbs	
Add Remove			Apopka, FL 32712
4) Change	<u>T</u>	Clemmie Harper	3235 Fudge Rd.
X Add			Apopka, FL 32712
Remove			
5) Change	<u>c</u>	Minnie Avery	3300 Harry St.
X Add			Apopka, FL32712
Remove			
6) Change	P	Sallie M. Jackson	3425 Dewberry Ave.
X Add			Apopka, FL 32712X
Remove			

(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.

Type of Action (Check One) Title Name Address 1) Change BS Jacqueline Harper 3235 Fudge Rd. X Add Apopka, FL 32712 2) Change S Irma Lee Franks 3600 Hogshead Rd. X Add Apopka, FL 32703 Add Remove Add 3) Change Add Add Remove Add 5) Change Add Add Remove Add 6) Change Add	Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Change X Add Apopka, FL 32712		Title	Name	<u>Addres</u> s
	1) Change	BS	Jacqueline Harper	3235 Fudge Rd.
2) Change	X Add			Apopka, FL 32712
Change X Add Apopka, FL 32703 Add Apopka, FL 32703 Add A	Remove			
X Add Apopka, FL 32703 Remove — 3) Change — — Add — — — Add — — — Add — — — Remove — — 6) Change — —	2) Change	CS	Irma Lee Franks	3600 Hogshead Rd.
3) Change	Y			Apopka, FL 32703
Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change	Remove			
Remove	3) Change		-	
4) Change	Add			
AddRemove 5) Change	Remove			
Remove	4) Change			
5) Change	Add			
Add	Remove			
Remove	5) Change		_	
6) Change	Add			
	Remove			
	6) Change			
Remove				

(attach additional sheets	, if necessary). (Be s	specific)			
hange organization name	from Plymouth Citize	ns Improvement.£	Committee-Inc. to-	Plymouth Commu	nity.lmprovement
	-			 	
 					
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September 24, 2019	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
September 24, 2019 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the amer was/were sufficient for approval.	ndment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	as/were
Dated September 24,2019	
Signature Moder 7, Bell	
(By the chairman of vice chairman of the board, president or other officer-if of have not been selected, by an incorporator — if in the hands of a receiver, true other court appointed fiduciary by that fiduciary)	
Gladys F. Bell	
(Typed or printed name of person signing)	
President	
(Title of person signing)	