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SECRETARY OF STATE
SHORE ANASSEF FLORID

M 7-20-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ration: <u>(TC)2, INC.</u>		<u></u>
DOCUMENT NUM	BER: N0400009295		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
	 	ardette Pierce	, , , , , , , , , , , , , , , , , , ,
	(Name of	f Contact Person)	
	Trinity United Met	thodist Church, Lake City	
	(Firn	n/ Company)	
	248 M. L. King	Street, P. O. Box 3508	
	(Address)	
	Lake City	y, Florida 32056	·
	 	ate and Zip Code)	
		@yahoo.com	
	·	ed for future annual report notifi	cation)
For further information	on concerning this matter, pleas	e call:	
Michel Burgess		at (386) 697-34	13
(Name	of Contact Person)		ime Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departme	nt of State:
☑ \$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)
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 assee, FL 32314	Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(TC)2, INC.		FILE
(Name of Corporation as curren	tly filed with	the Florida Dept.	of State)##
(Name of Corporation as curren	00009295		JEUNG 2: 61
(Document Number			TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 617.1006, Fl the following amendment(s) to its Articles of Inco	-	, this <i>Florida Not I</i>	For Profit Corporation adopt
A. If amending name, enter the new name of the	he corporatio	<u>n:</u>	
TRINITY COMMUNITY	TECHNOLO	GY CENTER, II	NC.
The new name must be distinguishable and conabbreviation "Corp." or "Inc." "Company" or "		-	•
B. Enter new principal office address, if applic		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	? <i>BOX</i>)	N/A	
D. If amending the registered agent and/or reg new registered agent and/or the new registe Name of New Registered Agent:			a, enter the name of the
		N/A	
New Registered Office Address:	(Florida street address)		
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.			accept the obligations of the
Sim	nature of Nove	Registered 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	·		
			(m) h
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
. <u>-</u>			
	,		
.			

The date of each amendment(s	s) adoption: July 13, 2011
•	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or meadopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated_July 1	3, 2011
Signature 4	mild Burgen
	he chairman or vice chairman of the board, president or other officer-if directors
	not been selected, by an incorporator - if in the hands of a receiver, trustee, o
other	court appointed fiduciary by that fiduciary)
	Michel Burgess
	(Typed or printed name of person signing)
	Chairperson
	(Title of person signing)

Page 3 of 3