

N040000010488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

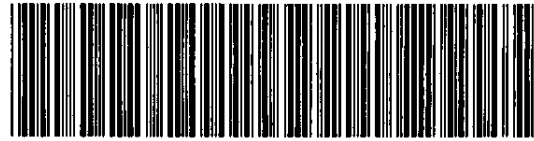
(Business Entity Name)

(Document Number)

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S. YOUNG

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 MAR -7 PM 2:45

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hannibal Square Community Land Trust, Inc.

DOCUMENT NUMBER: N04000010488

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

Please return all correspondence concerning this matter to the following:

Camille Reynolds
(Name of Contact Person)

Hannibal Square Community Land Trust, Inc.
(Firm/ Company)

P.O. Box 364
(Address)

Winter Park, FL 32789
(City/ State and Zip Code)

Camille@HannibalSquareCLT.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Camille Reynolds at 407 643-9111
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

Articles of Amendment
to
Articles of Incorporation
of

Hannibal Square Community Land Trust, Inc.

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

N04000010488

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:
*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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18 MAR -7 PM 2:45
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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>NILES, DARRYL</u>	<u>2265 LEE ROAD</u> <u>STE. 117</u> <u>WINTER PARK FL 32789</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>BRYANT, MARIA</u>	<u>450 S. VIRGINIA AVE</u> <u>WINTER PARK FL 32789</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>HOLLINGSWORTH, MARKETA</u>	<u>646 W. COMSTOCK AVENUE</u> <u>WINTER PARK FL 32789</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>ROMAN-OTERO, ANGEL</u>	<u>2236 DOE CROSSING COURT</u> <u>ORLANDO FL</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>REYNOLDS, JASON</u>	<u>2265 LEE ROAD</u> <u>STE. 117</u> <u>WINTER PARK FL 32789</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>CHAMBLISS, JULIAN</u>	<u>2265 LEE ROAD</u> <u>STE. 117</u> <u>WINTER PARK FL 32789</u>

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:

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<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>TALBERT, REBECCA</u>	<u>2265 LEE ROAD</u> <u>STE. 117</u> <u>WINTER PARK FL 32789</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>FLOYD, BENJAMIN</u>	<u>2265 LEE ROAD</u> <u>STE. 117</u> <u>WINTER PARK FL 32789</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
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6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ARTICLE III—CHARITABLE PURPOSE AND POWER

2. The specific and primary purposes are:

a. To provide opportunities for very low, low- and moderate-income families to secure housing that is decent and affordable and that is controlled by the residents on a long-term basis.

b. To preserve the quality and affordability of housing for future very low, low- and moderate-income residents of the community.

c. To combat community deterioration in economically disadvantaged neighborhoods by promoting the development, rehabilitation, and maintenance of decent housing in these neighborhoods; by promoting economic opportunities for very low, low and moderate income families of these neighborhoods; by making land available for projects and activities that improve the quality of life in these neighborhoods; and by assisting residents of these neighborhoods in improving the safety and well-being of their community.

d. To protect the natural environment and to promote the ecologically sound use of land and natural resources and the long-term health and safety of the community.

e. To discover and memorialize the history, culture, and architecture of the Winter Park Community Redevelopment Area; to research, educate, discover, procure, purchase, restore and assure the preservation of buildings, land, homes, or other articles which may relate to the history, culture, and architecture of the community to commemorate it as the area of origin for the Hannibal Square Community Land Trust.

February 20, 2016

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

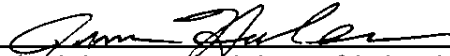
Effective date if applicable: MARCH 1, 2016
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3/2/2018

Signature 
(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)

JUAN HOLLINGSWORTH
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)