

2/1/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Association of Fundraising Professionals Arredondo Cr

DOCUMENT NUMBER: #N05000000290

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

Please return all correspondence concerning this matter to the following:

Beth McCall

(Name of Contact Person)

Munroe Regional Medical Center Foundation

(Firm/ Company)

PO Box 4349

(Address)

Ocala, FL 34478

(City/ State and Zip Code)

bethmccall@mrhs.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beth McCall

(Name of Contact Person)

at (352) 351-7233

(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

EFFECTIVE DATE
4-1-11

FILED
2011 MAR 31 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

The Association of Fundraising Professionals Arredondo Chapter, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N05000000290

(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 Association of Fundraising Professionals North Central Florida Chapter, Inc.
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)

PO Box 140461

Gainesville, FL 32614

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:

Beth McCall

1121 SW 1st Ave

New Registered Office Address:

(Florida street address)

Ocala

(City)

Florida 34471

(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.

Beth McCall

Signature of New 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>	<u>Address</u>	<u>Type of Action</u>
Presid ₊	Beth McCall	1121 SW 1st Ave Ocala, FL 34471	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Vice P ₊	Sherry Houston	4316 SW 13th St Gainesville, FL 32608	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Treas ₊	Barzella Papa	5214-A SW 91st Drive Gainesville, FL 32608	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

See attached

Remove the following from Officers and Directors of the AFP Arrendondo Chapter, Inc.

Jackine Hargrove
3006 NW 39th Pl
Gainesville, FL 32605

Michelle Hinson
10728 NW 38th Pl
Gainesville, FL 32606

Patrick Rhodes
725 NE Terrace
Gainesville, FL 32601

Stuart Wegener
1734 NW 7th Pl
Gainesville, FL 32606

THE ASSOCIATION OF FUNDRAISING PROFESSIONALS
ARREDONDO CHAPTER, INC.

ARTICLE 1 – Name of corporation

REMOVE – The Association of Fundraising Professionals Arredondo Chapter, Inc.

REPLACE WITH – The Association of Fundraising Professionals North Central Florida Chapter, Inc.

ARTICLE 1 SHALL READ: The name of the Corporation is the Association of Fundraising Professionals North Central Florida Chapter, Inc.

ARTICLE II – Registered agent in the State of Florida

REMOVE - Stuart Wegener
1734 NW 7th Place
Gainesville, FL 32603

REPLACE WITH - Beth McCall
1121 SW 1st Ave
Ocala, FL 34471

ARTICLE II SHALL READ: The name and address of the Corporation's registered agent in the State of Florida is:

Beth McCall
1121 SW 1st Ave
Ocala, FL 34471

ARTICLE IV – Corporation Affiliation

REMOVE – the Association of Fundraising Professionals Arredondo Chapter, Inc.

REPLACE WITH – the Association of Fundraising Professionals North Central Florida Chapter, Inc.

ARTICLE IV SHALL READ: The corporation shall be affiliated with the Association of Fundraising Professionals North Central Florida Chapter, Inc.

Corporation policies shall be in harmony with the policies of the Association of Fundraising Professionals.

The date of each amendment(s) adoption: February 17, 2011

(date of adoption is required)

Effective date if applicable: April 1, 2011

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

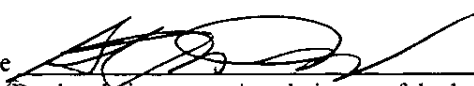
☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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

3-24-11

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)

Sherry N. Houston

(Typed or printed name of person signing)

Vice-President

(Title of person signing)