# N050000762

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Florida East Coast	Chapter of the Institute of	Internal Auditors, Inc.
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Nancy Held		
	(Name of Contact Perso	n)
Chapter Treasurer		
	(Firm/ Company)	
1281 Royal Fern Drive		
	(Address)	
Melbourne, FL 32940		
	(City/ State and Zip Cod	c)
nheld33308@yahoo.com		
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, please	e call:	
Nancy Held	81 at	3-546-9161
(Name of Contact Perso		rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## FILED

Florida East Coast Chapter of the Institute of Internal Auditors, Inc.

2018 JUL 27 AM 11: 29

(Name of Corporation as e	currently filed with the Flo	rida Dept. of State RETARY OF STAT
N05000000762		TALLAHASSEE, FL
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
The IIA Florida Space Coast Chapter, Inc.		The new
name must he distinguishable and contain the word "co "Company" or "Co." may not he used in the name.	orporation" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(F)	lorida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I		the obligations of the position.
<u></u>	Signature of New Regist	tered 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)

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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	Presiden	CAMACHO, LOURDES	
2) Change Add X Remove	<u>VP</u>	Marlette Toole	
3) Change Add Remove	Presiden	Marlette Toole	c/o 1281 Royal Fern Drive  Melbourne, FL 32940
4) Change Add Remove	VP	Kayla Spellman	c/o 1281 Royal Fern Drive  Melbourne, FL 32940
5) Change Add Remove	<del></del>		
6) Change Add Remove		<del>.</del>	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
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	date of each amendment this document was signed		, if other than the
	ctive date <u>if applicable</u> :	June 1, 2018	
	enve date <u>ir sponeavie</u> .	(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, this date will not be to Department of State's records.	listed as the
Adoj	ption of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.	
	Dated	07 19 2018	
	Signature		
	have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
		Marlette Twle  (Typed or printed name of person signing)	
		Chapter President (Title of person signing)	