

NO5096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

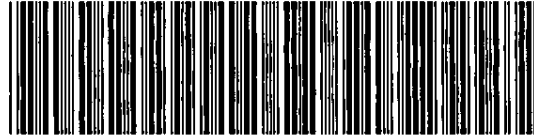
(Business Entity Name)

(Document Number)

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21 AUG - 8 AM 5:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 17 2016

C. CARROTHERS



August 3, 2016

Florida Department of State – Division of Corporations
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

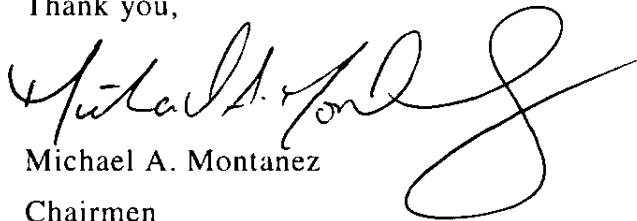
Subject: Appointment & Company Name Change approval
Reference: Florida Minority Supplier Development Council, Inc.
Document# N05096

To whom it may concern,

I am writing this letter to inform you that the Board of Directors for the Florida Minority Supplier Development Council, Inc. has voted and instructed the Chairmen on June 2nd, to terminate the employment of Mr. Malik Ali, President, and has officially appointed Nancy Straw as interim President. In addition, we have officially changed our name to the **Florida Diversity Business Council, Inc.**, which has established it's Fictitious Name registration# G16000019310 on March 9, 2016.

The **Florida Diversity Business Council, Inc.** was recreated in error as an independent group and was incorporated under **document# N16000006022.** We have dissolved this Incorporation to correct the error and submitted our Articles of Amendment form to adopt the new name under **Document# N05096.** All current Board Members and officers are the same for both groups.

Thank you,


Michael A. Montanez
Chairmen

Cc: Ginger Anderson

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FLORIDA MINORITY SUPPLIER DEVELOPMENT COUNCIL, INC.

DOCUMENT NUMBER: N05096

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

Please return all correspondence concerning this matter to the following:

NANCY STRAW

(Name of Contact Person)

FLORIDA DIVERISTY BUSINESS COUNCIL, INC.

(Firm/ Company)

7380 W. SAND LAKE ROAD, SUITE 500

(Address)

ORLANDO, FL 32819

(City/ State and Zip Code)

Nancylee@fmsdc.org

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

For further information concerning this matter, please call:

MICHAEL MONTANEZ

904

237-0776

at

(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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

FLORIDA MINORITY SUPPLIER DEVELOPMENT COUNCIL, INC.

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

N05096

(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:

FLORIDA DIVERISTY BUSINESS COUNCIL, 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**)

7380 W. SAND LAKE ROAD, SUITE 500

SUITE 500

ORLANDO, FL 32819

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

7380 W. SAND LAKE ROAD

SUITE 500

ORLANDO, FL 32819

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:

MICHAEL MONTANEZ

7380 W. SAND LAKE ROAD, SUITE 500

(Florida street address)

New Registered Office Address:

ORLANDO

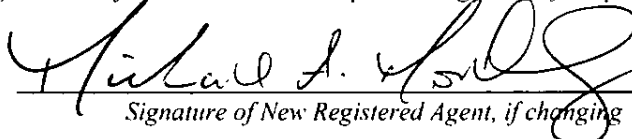
(City)

Florida 32819

(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

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 type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input 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	<u>P</u>	<u>MALIK ALI</u>	<u>7453 BROKERAGE DR</u>
<input type="checkbox"/> Add			<u>ORLANDO, FL 32809</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>NANCY STRAW</u>	<u>7380 W. SAND LAKE ROAD</u>
<input checked="" type="checkbox"/> Add			<u>SUITE 500</u>
<input type="checkbox"/> Remove			<u>ORLANDO, FL 32819</u>
3) <input type="checkbox"/> Change	<u>T</u>	<u>RHONDA ROBETELLI</u>	<u>5570 FLORIDA MINING BLVD</u>
<input checked="" type="checkbox"/> Add			<u>SUITE #401</u>
<input type="checkbox"/> Remove			<u>JACKSONVILLE, FL 32257</u>
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

JUNE 2, 2016

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

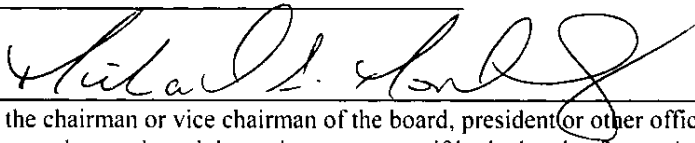
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this 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 AUGUST 8, 2016

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)

MICHAEL A. MONTANEZ

(Typed or printed name of person signing)

CHAIRMEN

(Title of person signing)