NO60000000373

(Red	questor's Name)	
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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: Women 1	V CHARGE, INC.		
DOCUMENT NUM	BER: NO60000003	73		
The enclosed Article	s of Amendment and fee are sul	bmitted for filing.		
Please return all corre	espondence concerning this mat	ter to the following:		
	EDNA DAVIS			
	(Name of	Contact Person)		
		n/ Company)		
	(Firm	n/ Company)		
			•	
	S	6022 CAROLINE	Dr.	
	(Address)		
	Wesley Chappe	ex, FL 33545 ate and Zip Code)		
	(City/ Sta	nte and Zip Code)		
	•	·		
	ETEPA OFIASh.			
M	E-mail address: (to be use	ed for future annual report notific	eation)	
For further informati	on concerning this matter, pleas	se call:		
		, • • • · · · · ·		
FONA I	DAVIS	at 813 435-	5128	
(Name	e of Contact Person)	at (<u>813</u>) 435- (Area Code & Dayti	me Telephone Number)	
Enclosed is a check t	for the following amount made	payable to the Florida Departmen	nt of State:	
□ #26 Ellian Eng	□ 642.75 PH: P 0.	Times as tilling the R	□ \$52.50 Filing Fee	
☐ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	Certificate of Status	
	Commente of Status	(Additional copy is	Certified Copy	
		enclosed)	(Additional Copy	
ha.:	ling Address	Street Address	is enclosed)	
	ndment Section	Amendment Section		
Division of Corporations			Division of Corporations	
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Cent	er Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

2010 ADD	ILED
TALLAHASSE	Enstan

Women N ChARGE, INC.

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

NO6000000 373

(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:

l contain the word "corporation" or " or "Co." may not be used in the nan	
epplicable: EET ADDRESS)	
ble: FICE BOX)	
or registered office address in Florid: egistered office address:	a, enter the name of the
(Florida street address)	·
	, Florida
	pplicable: EET ADDRESS) ble: FICE BOX) or registered office address in Florid: egistered office address:

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>	Name	Address	Type of Action
VP	Rosie Heim	22225 LAVER LANGE	Add
			ー Remove
			_ □ Add _ □ Remove
E. If amend	ing or adding additional Articles, e	nter change(s) here:	
(attach ad	ditional sheets, if necessary). (Be s	pecific)	
MANUFACTURE TAXABLE PROPERTY OF THE PARTY OF			
			
		And the second s	
			

The date of each amendment(s) a	doption: 2/./.o
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
was/were sufficient for approva	
There are no members or mem adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated4/1.	110
Signature &	A. Dami
(By the have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)
	EDNA DAVIS
	(Typed or printed name of person signing)
_	TREASURER
	(Title of person signing)

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