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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: HILLS BOROUGH COUNTY GAY, LESBIAN BISEXUAL, TRANSGENDER AND ALLIES DEMOCRATIC CAUCUS, INC
DOCUMENT NUMBER: N 06 000 002 037
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GAYLE T. MORGAN
HILLSBOROUGH COUNTY LESBIAN, GAY, BISEX WAL, TRANSGENDER
AND ALLIES DEMOCRATIC CAUCUS, INC. (Firm/Company)
(Firm/ Company)
803 PROCLAMATION DR. (Address)
(Address)
TAMPA FL 33613
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (813) 964-1476  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to of Incorporation

	Articles o	f Incorporation	" ,
HILLSBOROUGH COUNTY!	GAY LASBIA	of BISSKULAG	TRANSGEAL THE FOLID
AULIES DEMOCRA	TC CAUCUS	i INC	, IRANGE BIOLOGIC COMMENTS
(Name of Corporation as currently	filed with the Flori	la Dept. of State)	2014 APR - 7 PM 3: 3
NO6 000	00200	001	MAT. LURY OF STAT
(Docui	ment Number of Corp	oration (if known)	AMERICA STEEL PLONE
Pursuant to the provisions of section 617.10	006. Florida Statutes.	this <i>Florida Not For P</i>	rofit Corporation adopts the following
amendment(s) to its Articles of Incorporation			
A. If amending name, enter the new name of the LOUNTY COLOUTY OND ALLIES DEN name must be distinguishable and contain.	ne of the corporation	EM B. Sarie	AT TOMASS TIMER
THE STOROUGH CEUROTY	ADCRATICA (	BAICHS (NO	The new
name must be distinguishable and contain	the word "cornoratio	n" or "incorporated"	or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in t	the name.		
· ·	<del></del>	N / 1.	
B. Enter new principal office address, if	applicable:	J/A	<u> </u>
(Principal office address <u>MUST BE A ST</u>	REET ADDRESS )	,	
	-		
	_		
C. Enter new mailing address, if applic		MIA	
(Mailing address <u>MAY BE A POST O</u>	FFICE BOX)		
	_		
	-		
D. If amending the registered agent and new registered agent and/or the new			ter the name of the
new registered agent and/or the new			
Name of New Registered Agent:	<u>~</u>	A	
	,		
		lorida street address)	
New Registered Office Address:		ioriaa sireei aaaressy	
· · · · · · · · · · · · · · · · · · ·	N/A	-	
			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if ch	anging Registered A	gent:	
I hereby accept the appointment as registe.			e obligations of the position.
	•	•	
	NIA		· <del></del>
	Signature of New Ro	egistered Agent, if chan	ging

Page 1 of 4

## 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	PT John Do Y Mike Jon SV Sally Sm	<u>nes</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove		JA	
2) Change Add		<u></u>	
Remove 3) Change Add			
Remove 4) Change			
Add			
5) Change Add			
Remove 6) Change			
Add			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)			
	·· ·· ·· ·· ·		· · · · · · · · · · · · · · · · · · ·	<del></del>
		. <u></u> <u>-</u> .		

	date of each amendment( this document was signed.	s) adoption:	, if other than the
	ective date <u>if applicable</u> :	NIA	
	<del></del>	(no more than 90 days after amendment file date)	_
Ada	option of Amendment(s)	( <u>CHECK ONE</u> )	
X	The amendment(s) was/we was/were sufficient for app	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 di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Dated	4-7-14	
	Signature		
	have no	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)	
	L	ERciliA AlbisTu	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	