## N0600006344

(Requestor's Name)  (Address)
(Address)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer:





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97/19/23--01013--002 \*\*95.00

S. ROBERTS

NOV - 9 2023



August 18, 2023

LORETTA YOUNG 10101 SUNRISE LAKES BLVD #407 SUNRISE, FL 33322 US

SUBJECT: BROWARD COUNTY JROTC SUPPORT ASSOCIATION, INC.

Ref. Number: N06000006344

We have received your document for BROWARD COUNTY JROTC SUPPORT ASSOCIATION, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please submit the form to amend a not for profit corporation. The amendment you have submitted is for a profit corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS Regulatory Specialist III

Letter Number: 323A00019082

RFCEIVED NOV 0 9 2023

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Broward C	ounty JROTC Support Association, Inc.
DOCUMENT NUMBER: Nめ6 & 4 4 4 6 3	3:44
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to th	e following:
LoreHa Yo	e of Contact Person)
(Name	e of Contact Person)
Broward County TROTC S	Support Association Inc.
,	Tirm Company)
1010   Sunrise Lakes 6	Slud. # 407
	(Address)
Surrise FL 33322	
(City/	State and Zip Code)
CreHayung dyal	ture annual report notification)
<del>-</del>	is a minute report former and the second sec
For further information concerning this matter, please call:	
Loretta Young	at 954 - 257-6763  (Area Code) (Daytime Telephone Number)
(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:
(Ad	.75 Filing Fee &   \$\sum \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to

Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	apport Association Inc.
(Name of Corporation as currently filed with the Florida	Dept. of State)
N 4.6 dd dch d 6344	
NUGGGGGGGGGGOCUMENT Numb	per of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	tion:
JROTC Support Associal	The new ation" 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:	10101 Sunrise Lakes Blvd. #407
(Principal office address MUST BE A STREET ADDRESS	Sunrise FL 33322
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10101 Sunrise Lakes Blvd #407 Sunrise FL 33322
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office:	
Name of New Registered Agent: Lor	eHa Young
/0/0	eHa Young 1 Sunrise Lakes Blood. # 407
New Registered Office Address:	(Florida street address)
	$\frac{2}{\text{Coty}}$ Florida $\frac{33322}{\text{Code}}$
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fa	χ <u>ή</u>
S	ignature 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add		Jacki Yasin	3821 Woodfield Ct.
X Remove		, , , , , , , , , , , , , , , , , , , ,	
2) Change Add	1	Ginger Harrill Valdez	3718 W CitrusTree Davie FC 33328
Remove 3 ) Change Add Remove	<del></del>		
4) Change Add	<del></del>		
Remove		-	
5) Change Add		<u> </u>	
Remove		-	
6) Change Add			
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
N/A	,		

4. / A
The date of each amendment(s) adoption:    N
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.

Dated 14/1/2023
Signature Court oung
(By the chairman of 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)
LoreHa Young (Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)