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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	El Sol, Jupiter's Neigh		enter	
DOCUMENT NUMBER: _			-	
The enclosed Articles of Amo	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
Suzanne Cordero				
	(Name of Contact Per	rson)	
El Sol Jupiter's Neighborhoo	d Resource Center			
		(Firm/ Company)	
106 Military Trail				
		(Address)		
Jupiter, FL 33458				
	(City/ State and Zip C	Code)	
Suzanne@friendsofelsol.org				
	-mail address: (to be used	for future annual repo	ort notification	1)
For further information conc	erning this matter, please c	rall:		
Karen Clark		at	561	745-9860 x4601
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fe	ollowing amount made pay	rable to the Florida D	epartment of	State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section			eet Address endment Sect	ion

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 Articles of Incorporation of

El Sol, Jupiter's Nieghborhood Resource Center					····	
(Name of Corporation	as current	<u>ly filed with the</u>	Florida Dept. of	<u>State</u>)		
N06000006906	. <u>.</u>	 				
(Docun	nent Numbe	r of Corporation	n (if known)			
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida N</i>	ot For Profit Corp	poration adopt	s the follo	owing
A. If amending name, enter the new name of the	corporation :	<u>)n:</u>				
N/A						e new
name must be distinguishable and contain the word 'Company" or "Co." may not be used in the name	l "corporati e.	on" or "incorp	orated" or the abb	reviation "Co	rp." or "l	nc."
3. Enter new principal office address, if applica	hle:	N/A				
Principal office address MUST BE A STREET A	<u>DDRESS</u>)					
			<u> </u>	<u> </u>		
					<u> </u>	9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROY)	N/A			NI IN	JUN
(Stuting address BIAT DE ATOST OF FICE	<u>15071</u>)					<u>_</u>
						_=
					<u>5::</u>	<u> </u>
D. If amending the registered agent and/or registered	stered offic	e address in Flo	orida, enter the m	ame of the	XOX	ij
new registered agent and/or the new register		auress.				
Name of New Registered Agent:	N/A 	·				
			(Florida street ado	dress)		
<u>New Registered Office Address:</u>						
	N/A		·	, Florida		
		(City)		(Zip Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	<mark>Registered</mark> u. I am far	Agent: niliar with and c	accept the obligation	ons of the posi	tion.	
-		anature of New	Registered Avent.	if changing		

Page Lof 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 I V Mike . SV Sally .	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	Shiela Hirsch	106 Military Trail
Add			Jupiter, FL 33458
X Remove			
2) Change	T	PJ Willis	106 Military Trail
XAdd			Jupiter, FL 33458
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
N/A				
				
 				
·				
				

5/14/2019	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	
5/14/2019	
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 document's effective date on the Department of State's records.	e listed as the
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 6/3/2019	
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)	
Tim Steigenga	
(Typed or printed name of person signing)	
Chairman	
(Title of person signing)	