N 07 cocco3563

(Requestor's Name)			
(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: Filer Williams, called the			
illy changes to be made as: Corporation name and to delete the directors.			
9/24/1			
Office Use Only			



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08/25/17--01028--028 **52.50

2017 SEP 26 AM 9: 52

C. GOLDEN SEP 2 7 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: Knots	FOR KIdS	, INC.	
DOCUMENT NUMBER:	N070C	000025	162	
The enclosed Articles of Am	endment and fee are subn	nitted for filing.		
Please return all corresponde	nce concerning this matte	r to the following:		
	Effei	en O. Will	iam5	
••		(Name of Contact Perso	n)	
		Knots For (Firm/Company)	Kids, INC.	
		(Firm/ Company)	•	
	221	N. Hogen	Street Suite 205	
		(Address)		
	Ja	CKSanville,	FL 32202	
	((City/ State and Zip Coc	le)	
	ewilliams &	Knots 4 Kic	s.org	
Ľ	-mail address: (to be used	for future annual report	notification)	
For further information conc	erning this matter, please of	call:		
Fran	K Robinson	at	704 - 417 - 5258 rea Code) (Daytime Telephone Number)	
	(Name of Contact Person)	(A	rea Code) (Daytime Telephone Number)	
Enclosed is a check for the fo	allowing amount made pay	yable to the Florida Dep	artment of State:	
☐ \$35 Filing Fee	□S43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	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



August 15/2017

Board of Directors

Efferem O. Williams

President and Founder

Jerome Ballard
Executive Vice President

Frank Robinson Secretary and Parliamentarian

Brian Williams, Treasurer

Bruce LaVant, Ph.D.

Tyron Mills

Dr. Wesley Mills

Sherman Riley

Mario Payne

Bennie Hudson

Wade Rolle

Kelvin Lawson

Ken Moore

RE: Organization Name Amendment

This is an official letter of acknowledgement to amend the name from Knots For Kids, Inc. to Knots4Kids, Inc. The appropriate documentation is included. Thank you.

Efferen O. Williams

President and Founder (e)ewilliams@knots4kids.org (c) (904)535-6919 221 N. Hogan Street Suite 205 Jacksonville, FL 32202

"Sewing into the lives of young men through Health, Education and Personal Development"



August 30, 2017

EFFEREM O. WILLIAMS 221 N. HOGAN STREET SUITE 205 JACKSONVILLE, FL 32202

SUBJECT: KNOT FOR KIDS, INC. Ref. Number: N07000002562

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Bylaws are not filed with this office. Please retain them for your records.

You may make any amendments within the Articles of Amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 617A00017936

www.sunbiz.org

DO DOM GOOD BUILD DIVING

Articles of Amendment

10

Articles of Incorporation

	of	FILED
Knot Fo	BR Kids, Inc.	da Dept. of State) 2017-SEP 26 AM 9: 52
(<u>Name of Corporati</u>	on as currently filed with the Flori	da (/ept. of State)
<u>/V_C</u>	1 100000 do	_
(Dec	ument Number of Corporation (if kn	own)
Pursuancto the provisions of section 617,1006, Famenament(s) to its Articles of Incorporation:	lorida Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of t	the corporation: Knots	4 Kids, Irc.
name must be distinguishable and contain the wo	and " corneration" " incornerator	or the appropriation " Corp." or "Inc."
" Company" or " Co." may not be used in the na	me	
B. <u>Enter new principal office address, if appli</u> (Principal office address <u>MUST BE A STREET</u>		
B. <u>Enter new principal office address, if appi</u> (Principal office address MUST BE A STREET	ADDRESS)	
e e		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E(BOX) N/f	
	<u> </u>	
D. If amending the registered agent and/or re	gistered office address in Florida, c	enter the name of the
new registered agent and/or the new regist	ered office address: N/A	
Name of New Registered Agent	·	
	(Fla	oda street address)
<u>New Registered Office Addres</u>	<u>77.</u>	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered ag	g Registered Agent; ent. I am familiar with and accept t	he obligations of the position.
	Signature of New Registe	red 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 <math>ITO.

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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	<u>Director</u>	Shon Yates	221 N. Hogan St. Shite 265 Jacksonville, Fl 32202
2) Change Add Remove	Director	Dr. Seth Crapp	221. N. Hogan St. Suite 205 Jacksanville Fl 32202
3) Change Add Remove	Pilectr	Scothy Hendricks	221. No Hogan St. Suite 205 Jacksonville, FL 32202
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

(unach additional sheets, if necessary). (Be specific)					
ATTE P	Hodated.	ARTICAL	OF	INCORPORTION	ATTACKED
					
					
			 -		
	· · · · · · · · · · · · · · · · · · ·	- 			
					
 -					

The date of each amendment(s) adoption date this document was signed.	n: <u>8/12/17</u>	, if other than th
-	8/14/17	
	(no more than 90 days after amend	ment file date)
Note: If the date inserted in this block document's effective date on the Departme		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of	votes east for the amendment(s)
☐ There are no members or members en adopted by the board of directors.	ititled to vote on the amendment(s).	The amendment(s) was/were
Dated <u>8/15/1</u>	7	
Signature Salar	- O. William	
(By the chairman of have not been sele	r vice chairman of the board, preside cted, by an incorporator – if in the h ted fiduciary by that fiduciary)	
EF	FEREN O. W. 11ia. (Typed or printed name of printed name)	พ์
	(Typed or printed name of	person signing)
	President / Founder (Title of person	
	/ (Title of person	signing)