

ND7000003356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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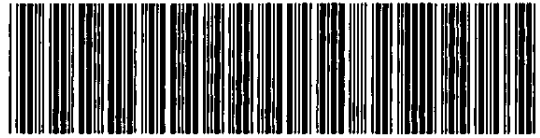
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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Amend
Name ch 8
12/15/4/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Connections4Kids and Families, Inc.

DOCUMENT NUMBER: N07000003356

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julie Henry

(Name of Contact Person)

Focus Counseling and Consulting

(Firm/ Company)

434 N. Meander Drive

(Address)

Altamonte Springs, FL. 32714

(City/ State and Zip Code)

Jhenry227@cfl.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Henry

(Name of Contact Person)

at (407) 721-5259

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
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

Articles of Amendment
to
Articles of Incorporation
of

Connections Outreach, Inc.

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

N07000003356

(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:

A. If amending name, enter the new name of the corporation:

Focus Counseling and Consulting, Inc.

The new name must be distinguishable and contain the word "corporation" 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:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

434 N. Meander Dr.

Altamonte, FL. 32714

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Julie Henry

New Registered Office Address:

434 N. Meander Dr.

(Florida street address)

Altamonte

(City)

Florida 32714

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------|-------------------------------------|--|
| PD | Ann Scimone | P.O. Box 7803 Longwood, FL 32791 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| SD | Mike Henry | P.O. Box 7803 Longwood, FL 32791 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| ST | John Scimone | P.O. Box 7803 Longwood, FL 32791 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Add Julie Henry as President/Director, Add Carey Colon as Secretary, Add Laurie Lee
as Treasurer

The date of each amendment(s) adoption: 11/27/09
(date of adoption is required)

Effective date if applicable: 11/27/09
(no more than 90 days after amendment file date)

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 11/27/09

Signature Julie Henry
(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)

Julie Henry
(Typed or printed name of person signing)

President/Director
(Title of person signing)