

N0700003911

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000244395 3)))



H180002443953ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Lawrence E. Crary, III, Esquire
Account Name : CRARY, BUCHANAN, BOWDISH, ET AL
Account Number : 076424001425
Phone : (772)233-4602
Fax Number : (772)223-4378

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: lec@crarybuchanan.com

RECEIVED
18 AUG 21 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FL

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
SOCIETY OF ST. VINCENT DE PAUL OF ST. CHRISTOPHER
CO**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

2018 AUG 21 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

G. GOLDEN

AUG 22 2018

((H18000244395 3)))

FILED

(((H18000244395 3)))

Articles of Amendment
to
Articles of Incorporation
of

2018 AUG 21 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FL

Society of St. Vincent de Paul of St. Christopher Conference, Inc.

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

N07000003911

(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:

Society of St. Vincent de Paul Martin County South Conference, 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:

Not applicable

(Principal office address MUST BE A STREET ADDRESS)**C. Enter new mailing address, if applicable:**

Not applicable

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

Not applicable

(Florida street address)

New Registered Office Address:

_____, Florida
(City) (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

(((H18000244395 3)))

(((H18000244395 3)))

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	Not applicable	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

(((H18000244395 3)))

F. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

((H18000244395 3)))

The date of each amendment(s) adoption: Not applicable, if other than the date this document was signed.

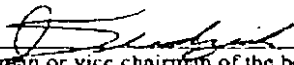
Effective date if applicable: Not applicable
(no more than 90 days after amendment file date)

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.
- ☐ 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 8-17-18

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)

Jim Dudziak

(Typed or printed name of person signing)

President

(Title of person signing)

((H18000244395 3)))