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☐ PICK-UP ☐ WAIT ☐ MA	ıIL
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: South Brevard Soc	iety for Human Resource M	fanagement Inc.		
	BER: N07000009645				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Kathy Scott				
	Name of Contact Person				
	South Brevard Society for Hu	aman Resource Managemer	nt Inc		
	-	Firm/ Company			
	P.O. Box 966				
		Address			
	Melbourne FL 32902				
		City/ State and Zip Code			
trea	surer@sbsh r m.org				
	-	to be used for future annua	report notification)		
For further informatio	n concerning this matter, plea	se call:			
Kathy Scott		at (404	630-1391		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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 Add Amendment Division of C P.O. Box 632	Section Corporations	Divisio	ment Section n of Corporations ntre of Tallahassec		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



April 13, 2021

KATHY SCOTT PO BOX 966 MELBOURNE, FL 32902

SUBJECT: SOUTH BREVARD SOCIETY FOR HUMAN RESOURCE

MANAGEMENT, INC.

Ref. Number: N07000009645

We have received your document for SOUTH BREVARD SOCIETY FOR HUMAN RESOURCE MANAGEMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form submitted is for a profit/social benefit corporation. Please see the enclosed information.

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.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 221A00007622

2021 KAY - 7 PH 12: 39

Articles of Amendment

to

Articles of Incorporation of

	Altitude 1	of		
South Brevard Society for			Mariana	7: 39
(Name of Corporation as currently filed with the			Manage went in	<u>C</u>
(Name of Corporation as currently theu with the	riorida Dept.	or state)		
NØ7ØØØØØ9645				
NØ7000009645	ent Number of	Corporation (if kn	own)	
Pursuant to the provisions of section 617,1006. Flori- amendment(s) to its Articles of Incorporation:				e following
A. If amending name, enter the new name of the	corporation:			
N/A				_The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation"	or "incorporated	or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>		N/A_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	V/A		-
D. If amending the registered agent and/or regist new registered agent and/or the new registere	ered office a d office addr	ldress in Florida,	enter the name of the	
Name of New Registered Agent:	N/A			
<u>New Registered Office Address:</u>	N/A	(Flo	rida streei address)	
	•		, Florida	
•	(0	City)	(Zip Code)	
New Registered Agent's Signature, if changing Ro	egi <u>ster</u> ed Age	<u>:nt:</u>		
I hereby accept the appointment as registered agent.	l am familio	ur with and accept i	the obligations of the position.	
	NA			
_	Signal	ure 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 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 A Add	PT John D V Mike J SV Sally S	<u>lones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	_		
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add		NA	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addi	ng additional Ar	ticles, enter change(s) here:	

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

de VI-Officers and Directors. Replace the first sentence paragraph, "The officers of the corporation shall consist Vice President of Membership, Vice President of Marketing, rograms, Vice President of Professional

the corporation shall consist of the President President Vice President of Membership, Treasurer, Secretary, and in Post President."	<u>-Elect</u> Imediate
Past President "	me was de
	
	
	
date this document was signed.	, if other than the
Effective date if applicable: N/A (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 document's effective date on the Department of State's records.	not be 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 <u>25 Apr 2021</u>
Signature Hally Ocat
(By the chairman of frice 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)
Kathy Scott
(Typed or printed name of person signing)
fresident, SBSHRM
(Title of person signing)

•