N0700011923

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3/1/11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Girls on the R	un of V	olusia C	County	
DOCUMENT NUM	IBER: N07000011923				·····
The enclosed Article	s of Amendment and fee are sub	omitted for	filing.		
Please return all corre	espondence concerning this mat	ter to the f	following:		
	Ka	thy Stee	n		
	(Name of	Contact P	'erson)		
	Girls on the R	un of Vo	lusia Cou	ınty	
	(Firm	n/ Compan	у)		
	490 F	Ridge Blv	vd.		
- , -	(/	Address)			
	DeLan	nd, FL 32	724		
	(City/ Sta	te and Zip	Code)		
	gotrdelar E-mail address: (to be use			eport notificati	on)
For further information	on concerning this matter, please	e call:			
Kathy Steen		at (386	7362657	
(Name	of Contact Person)		(Area Co	de & Daytime	e Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to	the Florida	Department of	of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	,	' is	☑ \$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			Division Clifton B 2661 Exe	ent Section of Corporations	

Articles of Amendment

FILED

Articles of Incorporation

2011 MAR -2 AM 11:51

SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State) N0700001192 (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: 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) 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: New Registered Office Address: (Florida street address) Florida

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

(City)

(Zip Code)

Page 1 of 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)

<u>T</u>	<u>itle</u>	<u>Name</u>	Address	Type of Action
Dire	ector	Kelton Erin	State Athorney's Office 101 N. Alabama Ave DeLand FL 32724	☑ Add □ Remove
Sec <u>.</u>	retary	Kim Rust	930 N. Florida Ave. Deland, FL 32720	Add ☐ Remove
Treasu	rrec	Anne H. Stevenson	145 E. Rich Ave. Suite G Deland, FL 32724	⊠ Add □ Remove
E		or adding additional Articles, enter che conal sheets, if necessary). (Be specific)		
_				
_				

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>	Name	Address	Type of Action
Director	Melody Clarke	245 Kincaid Deland, FL 32724	☑ Add □ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
E. If amending (attach addit	or adding additional Articles, enter chional sheets, if necessary). (Be specific)	ange(s) here:	
•		 	

The date of each amendment(s	s) adoption: 8-31-2010
Cffootive data if applicables	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or meadopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dateda	2-19-11 Kooth Secon
(By t	he chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Kathy Steen
	(Typed or printed name of person signing)
	Council Director
	(Title of person signing)

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