

NO 7696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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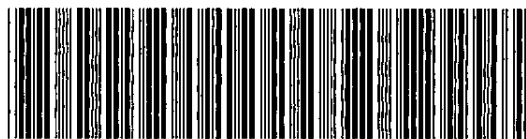
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TS  
7/28/08

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Sickle Cell Foundation, Upper Pinellas + Pasco County, Inc

DOCUMENT NUMBER: NO7096

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

Please return all correspondence concerning this matter to the following:

HATTIE BATTLE  
(Name of Contact Person)

Sickle Cell Foundation, Upper Pinellas + Pasco County Inc.  
(Firm/ Company)

P.O. Box 6312  
(Address)

Clearwater, FL 33758  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Hattie BATTLE at ( 727 ) 729-3250  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 17, 2008

HATTIE BATTLE  
P.O. BOX 6312  
CLEARWATER, FL 33758

SUBJECT: SICKLE CELL FOUNDATION, UPPER PINELLAS AND  
PASCO COUNTY, INC.  
Ref. Number: N07096

We have received your document for SICKLE CELL FOUNDATION, UPPER PINELLAS AND PASCO COUNTY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

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) 245-6927.

Tracy Smith  
Document Specialist

Letter Number: 608A00041915

RECEIVED  
2008 JUL 28 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

of

Sickle Cell Foundation, Upper Pinellas and Pasco County Inc.  
(Name of corporation as currently filed with the Florida Dept. of State)

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

No. 7096

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:

**NEW CORPORATE NAME (if changing):**  
Sickle Cell Disease Association of Upper Pinellas/Pasco/Hernando Counties, Inc.  
 (must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

(Attach additional pages if necessary)  
(continued)

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 08 JUL 28 PM 4:00  
BY 60322 UCBAW/STW

The date of adoption of the amendment(s) was: July 8, 2008

Effective date if applicable: \_\_\_\_\_  
(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 was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

Hattie Battle

(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.)

Hattie Battle

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**