## M0800000 1633

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Cassial lastructions to Filing Officer
Special Instructions to Filing Officer:

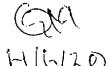
Office Use Only



800342436938

09/29/26 - 01016 - 006, \*\*\*\*35.06

JUNE OF CHRENDER OF



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: WEST AUGUSTINE YOUTH DE	VELOPMENT
N08000001633	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	<u>t</u> .
Please return all correspondence concerning this matter to the follow	ing:
JAIME D PERKINS	
(Name of Con	tact Person)
(Firm/ Co	
(Firm Co	inpany)
PO BOX 3952	
(Addr	ess)
ST AUGUSTINE, FL 32085	
(City/ State an	d Zip Code)
JDPANDASSOCIATES@GMAIL.COM	
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this matter, please call:	
JAIME D PERKINS	904 347-8392 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Fl	orida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certificate of Status Certified Co (Additional enclosed)	py Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

WEST AUGUSTINE YOUTH DEVELOPMENT, INC

Name of Corporation as currently filed with the Florida f	Dept. of State)	
N08000001633		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the f	iollowing
A. If amending name, enter the new name of the corporati	ion <u>:</u>	Th
name must be distinguishable and contain the word "corporate" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or	The new r "Inc."
B. Enter new principal office address, if applicable:	917 OAK ARBOR CIRCLE	
(Principal office address MUST BE A STREET ADDRESS	SAINT AUGUSTINE, FL 32084	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	PO BOX 3952	
	ST AUGUSTINE, FL 32085	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent:  JAIME D		2828 MAR 2
	OLUSIA STREET	<b>3</b>
New Registered Office Address:	(Florida street address)	23
ST AUGU	JSTINE Florida	<u> </u>
New Registered Agent's Signature, if changing Registered	(City) (Zip Code)	1: 49
I hereby accept the appointment as registered agent. I am fai		

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 X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> se <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>P</u>	COLBY WRIGHT	879 AVERY STREET ST AUGUSTINE, FL 32084
<ul> <li>X Remove</li> <li>2) Change</li> <li>X Add</li> </ul>	<u>P</u>	ELANDA FLOYD	917 OAK ARBOR CIRCLE ST AUGUSTINE, FL 32085
Remove 3 )	<u>T</u>	ANDREW PLUMMER	30 S WHITNEY STREET ST AUGUSTINE, FL 32084
4) Change Add	<u>T</u>	CHIA TERRY	3457 LAUREL LEAF DR ORANGE PARK FL 32065
Remove 5) Change Add	<u>v</u>	ELANDA FLOYD	917 OAK ARBOR CIR ST. AUGUSTINE, FL 32085
X Remove  6) Change Add	<u>v</u>	JAIME D PERKINS	1120 N VOLUSIA STREET ST AUGUSTINE, FL 32084
E. If amending or addin (attach additional shee		Articles, enter change(s) here: y). (Be specific)	

12/10/2010	
The date of each amendment(s) adoption: 12/19/2019	the
Effective date if 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 3 19 2020
Signature David O. Peuli
(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)
Jaime D. Perthins
(Typed or printed name of person signing)
Vice President. (Title of person signing)