## 1PE50000201

(Re	equestor's Name)	
(Äd	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL .
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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<u>COVER LETTER</u>	
TO: Amendment Section	ED
Division of Corporations 14 SEP 15 PM	1:57
NAME OF CORPORATION Partnership for Community Building	SIATE HATENIE
DOCUMENT NUMBER: NO80002391	ORHWY
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
William E. Finley	_
(Name of Contact Person)	<b>-</b>
Partnership, Inc.	
(Firm/ Company)	_
1515 N. Fderal Highway #300	
(Address)	<b>-</b>
Boca Raton FLL 33432	#
(City/ State and Zip Code) ► ₹	
picb@gate.net	5
E-mail address: (to be used for future annual report notification)	PH II
For further information concerning this matter, please call:	PH II.
William E. Finley	50
(Name of Contact Person) (Area Code & Daytime Telephone Number)	-
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Status   S43.75 Filing Fee & Certificate of Status   Certified Copy   Certif	

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



Articles of Amendment to Articles of Incorporation of

## PARTNERSHIP FOR COMMUNITY BUILDING

(Zip Code)

## Parnership for Community Building

amership for Community D	ulluling COMMUNI	<u>''                                   </u>
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N0800002391		
(Document Number of	Corporation (if known)	
	A Company of the Comp	
rsuant to the provisions of section 617.1006, Florida Statuendment(s) to its Articles of Incorporation:	nes, this <i>Florida Not For Projit Corporation</i> ado	pis the i
If amending name, enter the new name of the corpora	ation:	
ame must be distinguishable and contain the word "corpor		
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRES.	-/* DOCALERATION;	3
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1515 N. Federal Highw	
	#300 Boca Rato	71 7
	. 33432	
. If amending the registered agent and/or registered of		
new registered agent and/or the new registered office	e address:	
Name of New Registered Agent:	NA	
	(Florida street address)	
Now Pagistanad Office Address:		

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.

(City)

Signature of New Registered Agent, if changing

Page 1 of 4

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	PT John Doe V Mike Jor SV Sally Sm	<u>ies</u>				
Type of Action (Check One)		<u>Name</u>		Address	ΔιΛ	
1) Change	DIR.	JOHN COI	38ETT MO	150-109	Boack 9-32	.951
Add			į			
2) El Change	Socy. Trea	suru Ani	ta R. F	nlay	\$ 101	
<u></u> ⊬ Add			TOOE?	Saynton B	Scaeh BLVD	35
Remove	<i></i>		chandler	RF	19y £50	,
3) Change	DIK				ami Are	•
Add Remove				IAMI FL		10.
4) Change		SRZy-Tof	Dir. Edn.	and C.	West	
Add		,	4 Terrace	. 7749	r	
		BOCA RA	tea FL			
5) Change						
Add				-		
Remove						-
6) Change	<del></del>		<del></del>			
Add						
Remove		Pa	ge 2 of 4			

uttach additional sheet	ts, if necessary).	(Be specific)	
. ~ ~ ~	· ther	changes.	• •
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the americal.	idment(s)
There are no members or men adopted by the board of direct	obers entitled to vote on the amendment(s). The amendment(s) was	s/were
Dated 9-	Wellcom V. Iraling	
Signature	Wellcom ? Iroley	
have not be	irman or vice chairman of the board, president or other officer-if d een selected, by an incorporator — if in the hands of a receiver, trus appointed fiduciary by that fiduciary)	
Wi	iliam E. Finley, Pres/co	Ø ·
<del> </del>	(Typed or printed name of person signing)	
	Ther, C.F.O	
	(Title of person signing)	