

NID8000002651

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE INTERNATIONAL TRAVELING ALL STARS, INC

DOCUMENT NUMBER: N08000002651

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

Please return all correspondence concerning this matter to the following:

NATASHA POWELL

(Name of Contact Person)

POWELL SUPPORTIVE SERVICES, INC

(Firm/ Company)

23452 ABERCORN LANE,

(Address)

LAND O LAKES FL 34639

(City/ State and Zip Code)

POWELLSUPPORTIVE@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATASHA POWELL

(Name of Contact Person)

at 813 767-3808

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☒ \$52.50 Filing Fee
Certificate of Status Certified Copy Certificate of Status
(Additional copy is enclosed) (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

Articles of Amendment
to
Articles of Incorporation
of

THE INTERNATIONAL TRAVELING ALL STARS, INC

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

N08000002651

(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:

PSS-CMAC, INC

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:

(Florida street address)

New Registered Office Address:

(City)

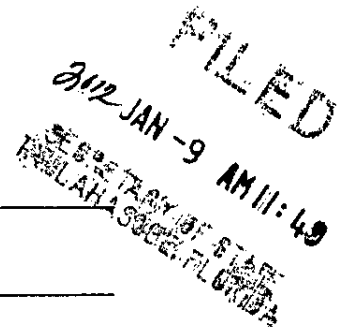
Florida

(Zip Code)

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



E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ARTICLE II- REGISTERED OFFICE ADDRESS

23452 ABERCORN LANE, LAND O LAKES FL 34639

ARTICLE III-PURPOSE

THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR

CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC PURPOSES AS SPECIFIED IN SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE, INCLUDING SUCH PURPOSES,

THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT

QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING

SECTION OF ANY FUTURE FEDERAL TAX CODE.

THE PURPOSE OF THIS CORPORATION IS: TO SUPPORT AND

PROVIDE CASE MANAGEMENT, ADVOCACY AND COUNSELING SERVICES

FOR AGED AND DISABLED, AIDS, MENTALLY ILL AND OTHER

VULNERABLE POPULATIONS REQUIRING SUPPORT AND

ACCESS TO COMMUNITY RESOURCES.

THE MANAGEMENT OF THE AFFAIRS OF THE CORPORATION

SHALL BE VESTED IN A BOARD OF DIRECTORS, AS DEFINED

BY THE CORPORATION'S BYLAW'S. NO DIRECTOR SHALL HAVE

ANY RIGHT, TITLE, OR INTEREST IN OR TO ANY PROPERTY OF THE

THE NUMBER OF DIRECTORS CONSTITUTING THE BOARD

OF DIRECTORS IS FOUR (4)

The date of each amendment(s) adoption: JANUARY 4, 2012

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(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 JANUARY 3, 2012

Signature N. Powell
(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)

NATASHA POWELL

(Typed or printed name of person signing)

CHAIRMAN/DIRECTOR

(Title of person signing)