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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Morth Port area Women's Club Incorporated NAME OF CORPORATION: _ NO800000 3230 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following: Carole Lynne Dicenzo (Firm/ Company) (City/ State and Zip Code) DICENZO & Comcast, Wet E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address

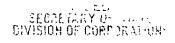
Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



15 APR 27 AM 7: 46

(Name of Corporation as currently filed with the Florida Dept. of State) No 800000 No 8000000 (Document Number of Corporation (if known)
Worth fort area Womano Club mountail
(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:
Survert Educational assistance fund 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: 30102 Kolomo Ml
(Principal office address MUST BE A STREET ADDRESS)
10/4 Character 15/3 2
U
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
Morth that Il.
) If any distance in the second country of the
). 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:
D 1. 9 - 1. C.
Name of New Registered Agent: Carol Rynns Filen W
20102 Linears are
(Florida sireet address)
New Registered Office Address:
Post Charlotte Florida #L 3395 C
(City), Florida
(Elp Code)
ew Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
aul Tellians
Signature of New Registered Agent, if Changing

address of each Offic (Attach additional shee Please note the officer P = President; V= Vic	er and/or Directo ets, if hecessary) /director title by th e President; T= T O = Chief Financi	ne being added: The first letter of the office title: reasurer; S= Secretary; D= Director; The all Officer. If an officer/director holds mu	officer/director being removed and title, name, and R= Trustee; C = Chairman or Clerk; CEO = Chief ore than one title, list the first letter of each office
Changes should be not a change, Mike Jones I Mike Jones, V as Remo	eaves the corpora	tion, Sally Smith is named the V and S. T	is the PST and Mike Jones is listed as the V. There is these should be noted as John Doe. PT as a Change,
Example: X Change X Remove A Add		<u>Doe</u> Jones Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change			
Remove			
Add			
4) Change			
Add			
5) Change Add			
Remove			
6) Change			

__ Add

__ Remove

. <u>If amend</u>	ling or adding add Iditional sheets, if n	itional Articles,	enter change(s)	<u>here</u> :		
		ecessary). (Be	specific)			
N						
N	<u> 114</u>			. <u></u>		
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	e date of each amendment(e this document was signed.	s) adoption:	Firet Appifother than the FCORPORATIONS
Eff	ective date <u>if applicable</u> :		27 AM 7:46
Ade	option of Amendment(s)	(CHECK ONE)	
ď	The amendment(s) was/wer was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
	There are no members or madopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
		1/2/8015 aude Lyne Di Cery) nairman or vice chairman of the board, president or other officer-if directors	
		been selected, by an incorporator – if in the hands of a receiver, trustee, or art appointed fiduciary by that fiduciary) [acole Ryuna Cenza	
		(Typed or printed name of person signing) (Title of person signing)	