

N08000004523

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09 JUN 19 AM 9:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ann & 6/20/09  
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**COVER LETTER**

**T☉: Amendment Section**  
Division of Corporations

**NAME OF CORPORATION:** Willie Jackson Community Services, Inc.

**DOCUMENT NUMBER:** N08000004523

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

Please return all correspondence concerning this matter to the following:

Ms. Delphine Jackson

Name of Contact Person

Firm/ Company

P.O. Box 12627

Address

Gainesville, Florida 32604

City/ State and Zip Code

delphinejackson@msn.com

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

For further information concerning this matter, please call:

Delphine Jackson

Name of Contact Person

at ( 352 )

219-3902

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 &  
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

June 11, 2009

MS DELPHINE JACKSON  
P.O. BOX 12627  
GAINESVILLE, FL 32604

SUBJECT: WILLIE JACKSON COMMUNITY SERVICE INC.  
Ref. Number: N08000004523

We have received your document for WILLIE JACKSON COMMUNITY SERVICE INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 309A00019787

Articles of Amendment  
to  
Articles of Incorporation  
of

Willie Jackson Community Services, Inc.

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

N08000004523

(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:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. If amending name, enter the new name of the corporation:**

*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**)

1616 NW 19th Circle

Gainesville, Florida 32605

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

P. O. Box 12643

Gainesville, Florida 32604

**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:

Ms. Delphine Jackson

New Registered Office Address:

1616 NW 19th Circle

(Florida street address)

Gainesville,


(City)

Florida 32605

(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

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input checked="" type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

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

Please DELETE current Article Two and replace with the following:

This corporation is a nonprofit benefit corporation and is not organized for the  
private gain of any person. The corporation is organized under the Nonprofit Public  
Benefit Corporation Law for charitable and educational purposes to aid the poor and  
disadvantaged individuals and families towards a life of self-sufficiency via  
numerous charitable and educational programs.

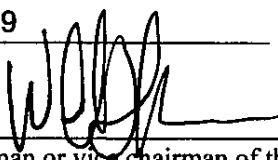
The date of each amendment(s) adoption: 6-16-09  
(date of adoption is required)

Effective date if applicable: 06/16/2009  
(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 June 16, 2009

Signature   
(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)

Willie Jackson  
(Typed or printed name of person signing)

President  
(Title of person signing)