

100427090471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

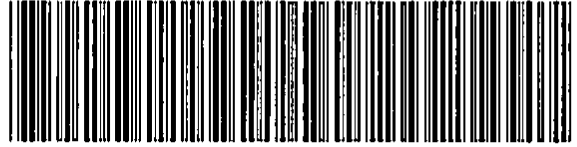
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



100427090471

100427090471

RECEIVED
2024 MAY -8 PM 2:46
OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FLORIDA

RECEIVED
2024 MAY -8 PM 2:46

RECEIVED

FILED
2024 MAY -5 PM 2:56
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CHI THETA ZETA INC.

DOCUMENT NUMBER: N08000007007

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

Please return all correspondence concerning this matter to the following:

DEARLINE THOMAS-BROWN

Name of Contact Person

CHI THETA ZETA CHAPTER OF ZETA PHI BETA SORORITY, INCORPORATED

Firm/ Company

P.O. BOX 588

Address

TALLAHASSEE, FL 32302

City/ State and Zip Code

chithetazeta2008@gmail.com

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

For further information concerning this matter, please call:

DEARLINE THOMAS-BROWN

850

544-0885

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

☐ \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

CHI THETA ZETA, INC.

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

N08000007007

(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:

CHI THETA ZETA CHAPTER OF ZETA PHI BETA SORORITY, INCORPORATED

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)

1375 CROSS CREEK CIRCLE

TALLAHASSEE, FL 32301

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 588

TALLAHASSEE, FL 32302

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:

Dearline Thomas-Brown

1375 Cross Creek Circle

(Florida street address)

New Registered Office Address:

Tallahassee

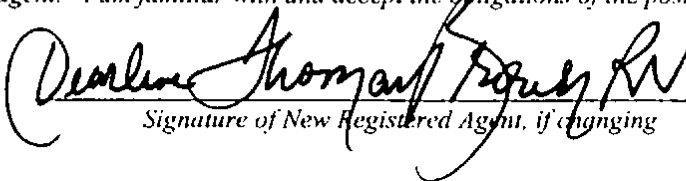
(City)

FL

(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

2024 MAY -5 PM 2:57
SECTION 617.1006
TALLAHASSEE, FL 32301

FILED

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change _____ Add _____ Remove	<u>Pres</u>	<u>Dearline Thomas-Brown</u>	<u>1375 Cross Creek Circle</u> <u>Tallahassee, FL 32301</u>
2) _____ Change _____ Add	<u>Sec</u>	<u>Natasha Wilson</u>	<u>614 Dent Street</u> <u>Tallahassee, FL 32304</u>
<u>X</u> Remove 3) <u>X</u> Change _____ Add _____ Remove	<u>VP</u>	<u>Niya Hubbard</u>	<u>1375 Cross Creek Circle</u> <u>Tallahassee, FL 30301</u>
4) _____ Change _____ Add _____ Remove	_____	_____	_____ _____ _____
5) _____ Change _____ Add _____ Remove	_____	_____	_____ _____ _____
6) _____ Change _____ Add _____ Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 May 8, 2024

Signature: Deanne Thomas-Brown, RN President

(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)

Deanne THOMAS-Brown, RN
(Typed or printed name of person signing)

PRESIDENT- LOCAL CHAPTER
(Title of person signing)