N0800000 7196

(Re	questor's Name)	
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(Cit	ry/State/Zip/Phone	e #)
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D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: Trinidad and Tobago Cultural Association of Tampa Bay					
DOCUMENT NU	N08000007106					
The enclosed Artic	icles of Amendment and fee are submitted for filing.					
Please return all co	correspondence concerning this matter to the following:					
	Karen Jeremiah					
	Name of Contact Person					
	Trinidad and Tobago Cultural Association of Tampa Bay					
	Firm/ Company					
	6013 Magnolia Park Blvd					
	Address					
Riverview, FI 33578						
City/ State and Zip Code						
	karen_jeremiah32@yahoo.com					
	E-mail address: (to be used for future annual report notification)					
For further information	nation concerning this matter, please call:					
Karen Jeremiah	at (813) 786-6415	:>				
Na	ame of Contact Person Area Code & Daytime Telephone Number	Tido Tig				
Enclosed is a chec	ck for the following amount made payable to the Florida Department of State:	<u>်း</u> သူ :				
■ \$35 Filing Fee	Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)	20 MM 30 FM 4: 11				

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



2020 A=> 3) Pr 8: 01

April 9, 2020

KAREN JEREMIAH TRINIDAD AND TOBAGO CULTURAL ASSOCIATION 6013 MAGNOLIA PARK BLVF RIVERVIEW, FL 33578

SUBJECT: TRINIDAD AND TOBAGO CULTURAL ASSOC. OF TAMPA BAY

INC

Ref. Number: N08000007196

We have received your document for TRINIDAD AND TOBAGO CULTURAL ASSOC. OF TAMPA BAY INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 720A00007614

Articles of Amendment to Articles of Incorporation of

Trinidad and Tobago Cultural Association of Tampa Bay

(Name of Corporation as currently filed with th	e Florida Dept. of State)	
N08000007196		
(Docur	nent Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
Caribbean-American People of Tampa Bay Inc.		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	n/a	
(Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX) n/a	
	.	
D. If amending the registered agent and/or regi	stered office address in Florida	, enter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:	n/a	
		lorida street uddress)
New Registered Office Address:		
	n/a	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		the obligations of the position.
	AlA	
-	Signature of New Regist	ered 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)

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:		John Doe Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
l) <u>№a</u> Change Add					
n/a Remove					
2) wa Change Add					
Remove 3) Remove Add Remove					
4) <u>wa</u> Change Add					
Remove					
5) <u>Ma</u> Change Add					
Remove					
6) Na Change Add					
Remove					
E. If amending or addin (attach additional shee	g addition	onal Articles, enter change(s) here: essary). (Be specific)			
n/a					
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The date of each amendment date this document was signed	t(s) adoption: _	4/20/20	<u> </u>			, if othe	er than the
Decation data to B by	4/20/20						
Effective date if applicable:		more than 90	days after ame	ndment file da	te)	<u></u>	
Note: If the date inserted in the document's effective date on t				ry filing requi	rements, this da	te will not be listed	as the
Adoption of Amendment(s)	<u>(C</u>	HECK ONE)	·				
The amendment(s) was/w was/were sufficient for ap	vere adopted by pproval.	the members a	and the number	of votes cast	for the amendm	ent(s)	

כ	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 4/20/20
	Signature
	Earl Brown
	(Typed or printed name of person signing)
	Director

(Title of person signing)