

N08000007464

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Amend/CC
10 9/30/09

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: Safe Haven of St. Lucie County, Inc.

DOCUMENT NUMBER: N08000007464

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

Please return all correspondence concerning this matter to the following:

Dorthea Oatts
(Name of Contact Person)

Safe Haven of St. Lucie County, Inc.
(Firm/ Company)

P.O. Box 2614
(Address)

Ft. Pierce, FL 34954
(City/ State and Zip Code)

dorthea.oatts@browardschools.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dorthea Oatts at (954) 557-8533
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Safe Haven of St. Lucie County, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO8000007464

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09 SEP 28 PM 4:40

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:

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**)

1911 Avenue O
Ft. Pierce, FL 34950

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

P.O. Box 2614
Ft. Pierce, FL 34954

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: Curtesa Arnett

New Registered Office Address: 1911 Avenue O
(Florida street address)

Ft. Pierce, FL, Florida 34950
(City) (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.

Curtesa Lynise Arnett
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>
<u>DIR</u>	<u>Cassandra Smith</u>	<u>4056 Greenwood</u> ^{DR} <u>Ft. Pierce, FL</u> <u>34982</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>DIR</u>	<u>Chris Dzadovsky</u>	<u>214 E. Orange Ave</u> <u>Ft. Pierce, FL</u> <u>34950</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<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)

Adding Section 2 - See attached

BYLAWS OF

ARTICLE I – NAME, PURPOSE

- Section 1:** The name of the organization shall be Safe Haven of St. Lucie County, Inc.
- Section 2:** The Safe Haven of St. Lucie County, Inc. is organized exclusively for charitable, religious, educational and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code. More specifically Safe Haven of St. Lucie County, Inc. will assist senior citizens, and people with disabilities with affordable, safe and sanitary housing.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE II – MEMBERSHIP

- Section 1:** Membership shall consist only of the members of the board of directors.

ARTICLE III – ANNUAL MEETING

- Section 1:** **Annual Meeting.** The date of the regular annual meeting shall be set by the Board of Directors who shall also set the time and place.
- Section 2:** **Special Meetings.** Special meetings may be called by the Chair or the Executive Committee.
- Section 3:** **Notice.** Notice of each meeting shall be given to each voting member, by mail, not less than ten days before the meeting.

The date of each amendment(s) adoption: 9/22/09

(date of adoption is required)

Effective date if applicable: 9/23/09

(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 9/22/09

Signature Dorthea Oatts

(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)

Dorthea Oatts

(Typed or printed name of person signing)

Director

(Title of person signing)