N0900001333

| (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: |] |
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Office Use Only



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COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF COR | PORATION: The Chrysalis F | oundation for Children | , Inc. |
|--|--|--|---|
| DOCUMENT NU | имвек: N0900001333 | | |
| The enclosed Artic | cles of Amendment and fee are subm | itted for filing. | |
| Please return all co | orrespondence concerning this matter | to the following: | |
| | | Salicrup | |
| | (Name of C | ontact Person) | |
| | The Chrysalis Found | dation for Children, Inc. | |
| _ | (Firm/ C | Company) | |
| | 6039 Corr | nelia Avenue | |
| | | dress) | |
| | | | |
| | | lorida 32807 and Zip Code) | |
| | (City/ State | and Zip Code) | |
| | | salisforchildren.org for future annual report notifica | tion) |
| n e a : e | ` | • | |
| For further inform | ation concerning this matter, please of | aii: | |
| Gladys Salicru | p | at (407) 227-8514 | 1 · |
| (Na | me of Contact Person) | (Area Code & Daytin | ne Telephone Number) |
| Enclosed is a chec | k for the following amount made pay | able 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 Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of



The Chrysalis Foundation For Children, Inc.

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

N09000001333

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

(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:

| bbreviation "Corp." or "Inc." <u>"Company"</u> | or "Co." may not be used in the nan | <u>te</u> . |
|--|---|-------------------------|
| Enter new principal office address, if apprincipal office address MUST BE A STREE | | |
| | | |
| | | |
| Enter new mailing address, if applicable | | |
| - (Mailina address MAV DE A DAST AEE) | ICE ROX) | |
| (Mailing address MAY BE A POST OFF) | | |
| (Maning address MAT BE A FOST OFF) | | |
| (Muning unaress MAT BE A FOST OFF) | | |
| . If amending the registered agent and/or | registered office address in Florida | , enter the name of th |
| . <u>If amending the registered agent and/or new registered agent and/or the new reg</u> | registered office address in Florida | , enter the name of th |
| . If amending the registered agent and/or | registered office address in Florida | , enter the name of th |
| . <u>If amending the registered agent and/or new registered agent and/or the new reg</u> | registered office address in Florida | , enter the name of th |
| . If amending the registered agent and/or new registered agent and/or the new reg | registered office address in Florida istered office address: | , enter the name of the |

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> | Type of Action |
|-----------------|---------------------------------|--|---------------------|
| Sec | Karen Voecks | 2096 Lake Drive Winter Park, Florida 32789 | ☐ Add☐ ☐ Remove |
| Sec | Gladys Salicrup | 6039 Cornelia Avenue Orlando, Florida 32807 | _ ☑ Add ☐ Remove |
| | | | _ |
| (attach | , | es, enter change(s) here: Be specific) nich this corporation is organized is t | o provide |
| charitabl | e contributions in the form of | clothing to children who have fallen | victim to sexua |
| and phys | sical abuse and neglect. In the | e event of dissolution of this corporat | tion all |
| assets h | eld by this corporation will be | transferred to another conforming ch | naritable |
| organiza | tion. | | |
| <u>organica</u> | | | |
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| The date of each amendmen | t(s) adoption: February 10, 2009 |
|---|--|
| Effective date <u>if applicable</u> : | (date of adoption is required) February 10, 2009 |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/w was/were sufficient for app | ere adopted by the members and the number of votes cast for the amendment(s) proval. |
| There are no members or adopted by the board of d | members entitled to vote on the amendment(s). The amendment(s) was/were irectors. |
| ĥa | y the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary) |
| | Gladys Lolly Salicrup |
| | (Typed or printed name of person signing) |
| | President/CEO |
| | (Title of person signing) |

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