

NO9000001908

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Theatre Of Creative Consciousness Of The Arts Inc.

DOCUMENT NUMBER: N09000001908

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

Please return all correspondence concerning this matter to the following:

Islah May Abdul Aziz

(Name of Contact Person)

Theatre of Creative Consciousness Of The Arts Inc.

(Firm/ Company)

425 NW 1st terr Apt.205

(Address)

Deerfield Beach, Florida 33441

(City/ State and Zip Code)

tccaflorida@gmail.com

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

For further information concerning this matter, please call:

Islah A. Aziz

(Name of Contact Person)

at (786) 879-4402

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

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14 NOV 17 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2014

ISLAH MAY ABDUL AZIZ
THEATRE OF CREATIVE CONSCIOUSNESS OF THE
425 NW 1ST TERR APT 205
DEERFIELD BEACH, FL 33441

SUBJECT: THEATRE OF CREATIVE CONSCIOUSNESS OF THE ARTS INC.
Ref. Number: N09000001908

We have received your document for THEATRE OF CREATIVE CONSCIOUSNESS OF THE ARTS 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):

On page 2 of your application please tell us whether you are changing, adding or deleting Joycelyn Norris. You must actually sign the application on page 4.

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: 114A00022740

RECEIVED
14 NOV 17 PM 4:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Theatre of Creative Consciousness of The Arts Inc.

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

N09000001908

(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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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

SECRET
TALLAHASSEE

14 NOV 17 PM 2:30

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(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:

X Change

PT

John Doe

X Remove

$$\overline{v}$$

Mike Jones

X Add

 \overline{SV}

Sally Smith

Type of Action

Title

Name

Address

(Check One)

1) Change

Treasurer

Joycelyn E. Norris

5699 NW. 194th lane

Miami Florida

33055

☒ Add

Remove

2) Change

Secrecy.

Anita Chapman.

7670 NW 29th St.

Coconut Creek Fla.

33063

~~X~~ Add

Remove

3) Change

Add

Remove

4) Change

 Add

Remove

5) Change

Add

Remove

6) Change

Add

Remove

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 10/6/2014

Signature Islah May Abdul Aziz

(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)

Islah May Abdul Aziz

(Typed or printed name of person signing)

Principle Officer/P

(Title of person signing)

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14 NOV 17 PM 2:30
SECRETARY OF
TALLAHASSEE COUNTY