## N09000002757

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Award Thewis 8-13-10

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION: Brothers Advo	ocating Service and Ins	spiration in the Com
DOCUMENT NUM	BER: <u>N0900002757</u>		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
<u> </u>		elle Johnson f Contact Person)	
Brot		and Inspiration in the Com n/ Company)	munity, Inc.
		. Box 3424 Address)	
<del></del>		, Florida 32721 ate and Zip Code)	
	vjohnson@ E-mail address: (to be use		ication)
For further informatio	n concerning this matter, pleas	se call:	
Vonzelle Johnson (Name	of Contact Person)	at ( 386 ) 848-97 (Area Code & Day	'19 time Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departme	ent 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
	ng Address dment Section	Street Address	is enclosed)

**Division of Corporations** 

2661 Executive Center Circle
Tallahassee FI 32301

Clifton Building

## **Articles of Amendment** to **Articles of Incorporation** of

<b>Brothers Advocating Service</b>	and Inspiration	on in the Community, Inc.
(Name of Corporation as cur	rently filed with ti	he Florida Dept. of State)
N09	9000002757	
(Document Nu	mber of Corporation	on (if known)
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of l.  A. If amending name, enter the new name of the section of t	Incorporation:	this Florida Not For Profit Corporation adopt
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"  B. Enter new principal office address, if ap (Principal office address MUST BE A STRE	contain the word or "Co." may not i	"corporation" or "incorporated" or the
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		PILED 200 AUG -10 P 3 30 SECRETARY OF STATE ALLAHASSEE, FLORIDA
D. If amending the registered agent and/or new registered agent and/or the new reg		
Name of New Registered Agent:	Vonze	elle Johnson
New Registered Office Address:	(Floria	nnemissett Avenue da street address)  DeLand , Florida32720

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

(City)

(Zip Code)

## 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>	Name	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
(attach addit	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
Amendent I-/	Article-Name and Purposes		· · · · · · · · · · · · · · · · · · ·
Said organiza	ation is organized exclusively for c	haritable, religious, educatio	nal, and scientifi
<u>purposes</u> , inc	cluding, for such purposes, the mal	king of distributions to organ	izations that
qualify as exe	empt organizations under section 5	601 (c)(3) of the Internal F	Revenue Code,
or correspon	ding section of any future federal t	ax code.	
			<del> </del>
		, - , - , - , - , - , - , - , - , - , -	
			<del></del>
			<del> </del>
<del></del>			

The date of each amendmen	t(s) adoption: August 6, 2010
	(date of adoption is required)
Effective date <u>if applicable</u> :	August 6, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we 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 di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated Aug	ust 6, 2010
Signature <u>]</u>	Seronica Walner
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Veronica Watson
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)