

NO9000000 4785

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19/10  
SOUTH CAROLINA  
DIVISION OF CORPORATION  
20 JAN -9 PM 1:10

JAN 10 2020  
C McNAIR

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LADIES EMPOWERMENT & ACTION PROGRAM, Inc.

DOCUMENT NUMBER: NO9000004785

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

Please return all correspondence concerning this matter to the following:

MAHLIA LINDQUIST

Name of Contact Person

LADIES EMPOWERMENT & ACTION PROGRAM INC

Firm/ Company

3141 SW 8<sup>TH</sup> ST SUITE A

Address

MIAMI, FL 33135

City/ State and Zip Code

mahlia@leapforladies.org

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

20 JAN -9 PH 1:10  
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Mahlia Lindquist

Name of Contact Person

at ( 303 ) 619-5925

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

LADIES EMPOWERMENT AND ACTION PROGRAM INC

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

ND9000004785

(Document Number of Corporation (if known))

RECEIVED  
20 JAN -9 PH 1:10  
STATE  
SECRETARY OF CORP. AFFAIRS

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)

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:

(Florida street address)

New Registered Office Address:

(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*

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TREASURER</u>	<u>GEMMA M GARCIA</u>	<u>6767 Collins Ave, #1602</u> <u>MIAMI BEACH, FL 33141</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>HOLLY WOODBURY</u>	<u>1140 CLIFFROSE ST</u> <u>HOollywood, FL 33019</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Secretary</u>	<u>IREBECCA BROWN</u>	<u>350 NW 4th St</u> <u>MIAMI, FL 33128</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DIRECTOR</u>	<u>SAED BOREN</u>	<u>536 Alhambra Circle</u> <u>CORAL GABLES, FL 33134</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DIRECTOR</u>	<u>SILVANA RONCAL</u>	<u>2951 DAY AVENUE</u> <u>MIAMI, FL 33133</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DIRECTOR</u>	<u>TOM BOWMAN</u>	<u>212 NW 93rd St</u> <u>MIAMI SHORES, FL 33150</u>

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E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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☐ 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 November 8, 2019

Signature *E. Garcia*  
(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)

*Genene M. Garcia*  
(Typed or printed name of person signing)

*TREASURER*  
(Title of person signing)