

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Barry University Nursing Students Association, Inc

DOCUMENT NUMBER: NO9000005002

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

Please return all correspondence concerning this matter to the following:

Sharon Y. Rafalko
(Name of Contact Person)

Barry University
(Firm/ Company)

11300 NE 2nd ave
(Address)

Miami Shores, FL 33161
(City/ State and Zip Code)

srafalko@mail.barry.edu
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Y. Rafalko at (305) 899-3842
(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:

- | | | | |
|---|---|--|--|
| <input checked="" 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 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

Articles of Amendment
to
Articles of Incorporation
of

Barry University Nursing Students

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

N09000005002

(Document Number of Corporation (if known))

FILED

10 SEP 14 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Sharon Y. Rafalko

New Registered Office Address:

11300 NE 2nd ave

(Florida street address)

Miami Shores

(City)

Florida 33161

(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.

Sharon Y. Rafalko
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)

| Title | Name | Address | Type of Action |
|-------|-----------------|--|--|
| P. | Tyis S Lawrence | 9926 NW 51st Terrace Doral, FL 33178 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| T | Isaura Rayo | 3530 Banks Rd apt 105 Margate, FL 33063 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| VP | Ruth Janvier | 640 West Jasmine Dr. Lake Park, FL 33403 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

~~Treasurer~~ Dorothy Leveille
8700 SW 133 ave
Apt # 220
Miami, FL 33183

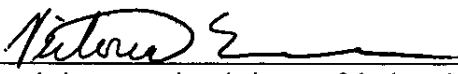
The date of each amendment(s) adoption: 9-10-10

Effective date if applicable: 9-10-10
(date of adoption is required)
(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 9/10/10

Signature 

(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)

Victoria Evans
(Typed or printed name of person signing)

President
(Title of person signing)