

NO9000009802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

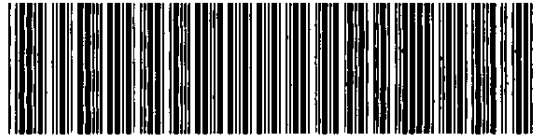
(Business Entity Name)

(Document Number)

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05/14/10--01006--005 **35.00

10 MAY 14 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

PC
5/18/10
K

PAULA J. HOUSE

P.O. Box 2980, Lake Placid, FL 33862-2980
(863)659-1099, (207)712-5481
e-mail: Paulatoo@gmail.com

May 11, 2010

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

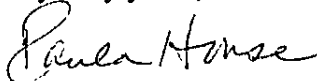
Re: Eagle No Training Center, Inc.
Document No. PO9000079644

Dear Corporate Filing Personnel,

I enclose for filing the Articles of Amendment and fee of \$35 for the above-named non-profit corporation.

I am the contact person for this non-profit, and please send all correspondence to me at the referenced address. Thank you for your assistance.

Very truly yours,



Paula J. House
863-659-1099
33 Mockingbird Rd.
P.O. Box 2980
Lake Placid, FL 33862-2980

Articles of Amendment
to
Articles of Incorporation
of

No Eagle Training Center, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

P09000079644

(Document Number of Corporation (if known))

APPROVED
AND
FILED
10 MAY 11 PM 3:44
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:

Citizen Involvement, Inc.

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)

33 Mockingbird Rd.
Lake Placid, FL 33852

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 2980
Lake Placid, FL 33862

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:

Paula House

New Registered Office Address:

33 Mockingbird Rd.

(Florida street address)

Lake Placid

(City)

Florida

(Zip Code)

FL 33852

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.

Paula House

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>	<u>Type of Action</u>
<u>Pres.</u>	<u>Paula House</u>	<u>PO Box 2980</u> <u>Lake Placid</u> <u>FL 33862</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Pres.</u>	<u>James Upchurch</u>	<u>4626 Cadagua Dr.</u> <u>Sebring</u> <u>FL 33872</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Vice Pres</u>	<u>Douglas Karlson</u>	<u>260 Karlson Rd.</u> <u>Venus</u> <u>FL 33060</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	<u>See Attached</u>		

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

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

Article I. As shown with this addition:
"and to promote social justice."

Article III. Street address shall be:
33 Mockingbird Rd., Lake Placid, FL 33852

Article IV. Registered office address:
33 Mockingbird Rd, Lake Placid, FL 33855

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>	<u>Type of Action</u>
<u>V.P.</u>	<u>Mary Torrison Smith</u>	<u>1444 Pine Tree Cir.</u> <u>Sebring, FL</u> <u>33875</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec-Tr.</u>	<u>Ellen Peterson</u>	<u>8791 Corkscrew Rd</u> <u>P.O. Box 345</u> <u>Estero, FL 33929</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	
_____	_____	_____	

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

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

See attached

The date of each amendment(s) adoption: 5/11/10

(date of adoption is required)

Effective date if applicable: 5/11/10

(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 5/11/10

Signature James E. Upchurch Jr

(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)

James E. Upchurch Parls House
(Typed or printed name of person signing)

(former) President (current) President
(Title of person signing)