

N09000010907

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TALLAHASSEE, FLORIDA

Amc 3/29/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Missions For Matthews, Inc

**DOCUMENT NUMBER:** N09000010907

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

Please return all correspondence concerning this matter to the following:

Jeffrey Micklow  
(Name of Contact Person)

Missions for Matthew, Inc  
(Firm/ Company)

PO Box 142  
(Address)

Tarpon Springs, FL 34688  
(City/ State and Zip Code)

missionsformatthews@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey Micklow at ( 727 ) 484-0252  
(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:

☒ \$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

Missions for Matthews, Inc

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

N09000010907

(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:

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:

New Registered Office Address:

(Florida street 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

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TALLAHASSEE, FLORIDA

**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>P</u>	<u>Jeffrey Micklow</u>	<u>1545 Dartmouth Dr</u> <u>Holiday, FL 34691</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>A</u>	<u>Matthew Micklow</u>	<u>1316 1/2 Shawnee Lane</u> <u>Holiday, FL 34691</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>A</u>	<u>Susan Smiley</u>	<u>17526 Glenapp Drive</u> <u>Land O Lakes, FL 34638</u>	<input checked="" 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)*

Article III. The purpose of Missions for Matthews , Inc is to support individuals with mental disabilities through Job placement, support groups, financial planning, clothing and other necessities for daily living. Missions for Matthews, Inc is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

Article IX. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed by the Court of Common Pleas of the county in which the principle office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

See Attached for additional Board Members

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**Additional Newly Added Board Members**

D Teresa Borrelli      8629 Boyt Rd  
Zephyrhills, Fl 33540

D Colleen White      9036 Hunt Club Lane  
Port Richey, Fl 34668

D Eric Collins      2560 Society Dr  
Holiday, Fl 34691

D Lori Harper      24140 Landing Dr  
Lutz, Fl 33559

The date of each amendment(s) adoption: March 23, 2010  
(date of adoption is required)

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 March 23, 2010

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)

Jeffrey Micklow

(Typed or printed name of person signing)

President

(Title of person signing)