N09096

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HODN
007
J. HORNE OCT 2 3 2023



10/18/23--01084--002 ++35.00

Office Use Only



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Not for Profit Corporation pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

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> The original incorporators cannot be amended.

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- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123. Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee	\$35.00 (Includes a letter of acknowledgment)
Certified Copy (optional)	\$8.75
Certificate of Status (optional)	\$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

<u>Mailing Address</u>	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

For further information, you may call the Amendment Section at (850) 245-6050

• •		COVER LETT	ER	
TO: Amendment Section Division of Corporation	ons			
NAME OF CORPORATI	St. Gerard Campus.	Inc		
DOCUMENT NUMBER:	N09096	<u> </u>		
The enclosed Articles of A	mendment and fee are sub	mitted for filing.		
Please return all correspond	lence concerning this matt	er to the following:		
Brittany Glisson				
		(Name of Contact P	erson)	
St. Gerard Campus, Inc				
		(Firm/ Compan	y)	
PO Box 4382				
		(Address)		
St Augustine FL 32085				
		(City/ State and Zip	Code)	
offmgr@stgerardcampus.or	g			
	E-mail address: (to be used	l for future annual re	port notificatio	n)
For further information con	cerning this matter, please	call:		
Deanna Cedar		at	904	829-5516
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing /	Address		reet Address	ion

Amendment Section Division of Corporations P.O. Box 6327

Amendment Section Division of Corporations The Centre of Tallahassee

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

		es of Amendment to s of Incorporation of	
Name of Corporation as currently filed with the	<u>Florida (</u>	Dept. of State}	¥,
	_		
(Docume	2nt Numb	er of Corporation (if known)	
ursuant to the provisions of section 617.1006, Flori mendment(s) to its Articles of Incorporation:	da Statute	es, this Florida Not For Profit Col	rporation adopts the following
. If amending name, enter the new name of the	<u>corporat</u>	lion:	
Not Applicable			The new
ame must be distinguishable and contain the word	"corpora	tion" or "incorporated" or the ab	breviation "Corp." or "Inc."
<u>Company" or "Co." may not be used in the name.</u>			
. Enter new principal office address, if applicab		Not Applicable	
Principal office address <u>MUST BE A STREET AD</u>	DRESS)	
			n
Enter new mailing address, if applicable:		Not Applicable	
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>OX</u>)		·
. If amending the registered agent and/or regist	ered offic	ce address in Florida, enter the n	ame of the
new registered agent and/or the new registered	<u>d office a</u>	ddress:	
	Not Appli	cable	
Name of New Registered Agent:			
Name of New Registered Agent:	<u> </u>		
<u>Name of New Registered Agent</u> :		(Flarida street ad	(pase)
<u>Name of New Registered Agent</u> : 		(Florida street ad	(ress)

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.

(Citv)

Signature of New Registered Agent, if changing

(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)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> John D V_ <u>Mike J</u> SV_Sally S	lones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) <u>×</u> Change Add	<u>s</u>	John Alexander	PO Box 4382 St Augustine FL 32085-4382
2) Remove 2) Change Add	VC	Allan Gieselman	PO Box 4382 St Augustine FL 32085-4382
x Remove 3) Change Add x Remove	<u>s</u>	Joseph Cinney	PO Box 4382 St Augustine FL 32085-4382
4) Change Add	<u>C</u>	Christopher Thompson	PO Box 4382 St Augustine FL 32085-4382
Remove 5) Change Add			
Remove රා Change Add			
Remove			

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

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

Not Applicable

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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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.

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Ъ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

-2023 Dated Burtom 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)

Brittany A GLISSON (Typed or printed name of person signing)

Executive `V C

(Title of person signing)