NO93 15

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R. WHITE AUG 1 6 2019

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Phi Delta Theta Chapter House Association, Inc DOCUMENT NUMBER: NØ9375 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) 20th Street Fort Lauderde / FL 33315 E-mail address: (to be used for future annual eport notification) For further information concerning this matter, please call: Kyan Lipps at 504 - 701 - 5837
(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: ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address Mailing Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

	Articles of Amendment	• • •	1.00 Per
	Articles of Incorporation	• .	الله الله الله الله الله الله الله الله
Phi Delta Theta C	hapter House	Association 2013/12	<u>3.</u> PH 5: I
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	
NØ	9375	l	
·	nt Number of Corporation (if		
Pursuant to the provisions of section 617.1006, Floridament(s) to its Articles of Incorporation:	a Statutes, this Florida Not F	For Profit Corporation adopts the follow	ring
A. If amending name, enter the new name of the co	orporation:		
		The #	
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	corporation" or "incorporat	ed" or the abbreviation "Corp." or "In	s. ''
B. Enter new principal office address, if applicable	<u></u>		
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u> </u>		
<u> </u>			
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florid office address:	a, enter the name of the	
Name of New Registered Agent: _			
-		(Florida street address)	
New Registered Office Address:			
<u>-</u>		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and acce	ept the obligations of the position.	
- 			_ _
	Signature of New Reg	gistered 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: X Change X Remove X Add	V Mik	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		DAVID Webster	
Add Remove			
2) Change Add	<u>P</u> _	Greg Werss	
Remove 3) Change Add		Robert Tucker	10011 Bridge ton Dr. Tampa FL 33626
Remove 4) Change Add	<u> </u>	Ryan Lipps	1200 SW 20th St. Fort Landadale, FL 33315
Remove 5) Change Add		Brian Alkn	2030 ALAGUA LAKES BLV Longwood, FL 32779
Remove Change Add Remove	AT Assis	Will Norris Fant Treasured Page 2 of 4	1174 NW Scenic Lake Dr. Lake City FL 32055

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)									
(attach additional sheets, if necessary)	. (Be specific)							
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if 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 document's effective date on the Department of State's records.	be listed as the
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 <u>August</u> 7, 2019	
Signature	_
(By the chairman of 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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Secretary	
(Title of person signing)	