

N11000002839

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11 JUN 27 PM 2:08  
SECRETARY OF STATE  
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*Amend*

*06/27/11*

*DC*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2011

GWENDOLYN D. SAFFO  
EASTSIDE ADVOCACY GROUP FOR YOUTH, INC.  
P. O. BOX 473  
GAINESVILLE, FL 32602

SUBJECT: EASTSIDE ADVOCACY GROUP FOR YOUTH, INC.  
Ref. Number: N11000002839

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 811A00015310

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

*Personal & Confidential Attention: Ms. Darlene Connell*

NAME OF CORPORATION: Eastside Advocacy Group for Youth, Inc.

DOCUMENT NUMBER: N11000002839

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

Please return all correspondence concerning this matter to the following:

Gwendolyn D. Saffo

(Name of Contact Person)

Eastside Advocacy Group for Youth, Inc.

(Firm/ Company)

P. O. Box 473

(Address)

Gainesville, FL 32602

(City/ State and Zip Code)

eagyinc@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Geraldine McClellan

(Name of Contact Person)

at ( 352 ) 538-5080

(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

*This fee was submitted  
and is pending receipt  
of this form to be  
submitted to Ms.  
Darlene Connell*

Articles of Amendment  
to  
Articles of Incorporation  
of

Eastside Advocacy Group for Youth, Inc.

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

N11000002839

(Document Number of Corporation (if known))

FILED  
11 JUN 27 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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)

P. O. Box 473

Gainesville, FL 32602

**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*

**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>
VC	Eldred Lewis	936 NW 31st. Avenue Gainesville, FL 32609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input 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)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: June 20, 2011

Effective date if applicable: Immediately (6/20/2011)  
*(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 June 24, 2011

Signature Geraldine W. McClellan  
(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)

Geraldine W. McClellan  
(Typed or printed name of person signing)

President  
(Title of person signing)