## N11000004420

| (Requestor's Name)                      |
|---|
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| (Address)                               |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| Fmerald NAME OF CORPORATION:  | Coast Omega Foundation  | on, Inc.  | 4                   |
|---|---|---|---------------------|
| N110000044:   | 20  |   | 17 HR 27 H          |
| The enclosed Articles of Amendment and  | fee are submitted for fi  | ling.   | 玉                   |
| Please return all correspondence concerni   | ng this matter to the foll  | owing:  |                     |
| Sylvester Griffin   |   |   | •                   |
|   | (Name of C  | ontact Person)  |                     |
| Emerald Coast Omega Foundation, Inc.  |   |   |                     |
|   | (Firm/  | Company)  | ·····               |
| P.O. Box 151  |   |   |                     |
|   | (A)   | ldress)   |                     |
| Lynn Haven, Florida 32444   |   |   |                     |
|   | (City/ State  | and Zip Code)   | <del></del>         |
| SG0541@aol.com  |   |   |                     |
| E-mail address  | (to be used for future a  | nnual report notification)  |                     |
| For further information concerning this ma  | atter, please call:   |   |                     |
| Sylvester Griffin   |   | \$50 265-595  | 3                   |
| (Name of Co   | ntact Person)   |   | e Telephone Number) |
| Enclosed is a check for the following amo   | unt made payable to the   | Florida Department of State:  |                     |
| _   | iling Fee & DS43.75 F<br>e of Status Certified<br>(Addition<br>enclosed | Copy Certificate of Str<br>al copy is Certified Copy  | atus                |
| Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 | s   | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301 | le                  |

## Articles of Amendment to Articles of Incorporation of

| Emerald Coast Omega Foundation, Inc.  |                                      | da Dept. of State)                      |
|---|--------------------------------------|---|
| (Name of Corporation  | as currently filed with the Flori    | da Dept. of State)                      |
| N11000004420  |                                      | 27                                      |
| (Docu   | ment Number of Corporation (if kn    | own)                                    |
| Pursuant to the provisions of section 617,1006, Flo<br>amendment(s) to its Articles of Incorporation: | orida Statutes, this Florida Not For | Profit Corporation adopts the following |
| A. If amending name, enter the new name of th   | e corporation:                       |   |
|   | <u></u>                              | The new                                 |
| name must be distinguishable and contain the wor. "Company" or "Co." may not be used in the nam       |                                      | " or the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applic:   | BH Capri Drive                       |   |
| (Principal office address MUST BE A STREET)   |                                      | 32405                                   |
|   | <del></del>                          |   |
|   |                                      |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE                    | <i>ΒΟΧ</i> )                         |   |
|   |                                      |   |
|   |                                      |   |
| D If  |                                      | -4-4                                    |
| D. If amending the registered agent and/or registered agent and/or the new registered.                |                                      | enter the name of the                   |
| Name of New Registered Agent:   | Sylvester Griffin                    |   |
|   | 151 Lake Merial Trail                |   |
|   |                                      | rida sireci address)                    |
| New Registered Office Address:  |                                      |   |
|   | Panama City                          | , Florida                               |
|   | (City)                               | (Zip Code)                              |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen      |                                      | he obligations of the position.         |
|   | Sulvestin Dutti                      |   |
| -   | Signature of New Deviste             | red Avent, 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 | <u>PT</u><br><u>V</u><br><u>SV</u> | John Do<br>Mike Jo<br>Sally Si | ones        |                 |
|-----------------------------------|------------------------------------|--------------------------------|-------------|-----------------|
| Type of Action<br>(Check One)     | Title                              |                                | <u>Name</u> | <u>Addres</u> s |
| 1) Change                         |                                    | _                              | N/A         |                 |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |
| 2) Change                         |                                    |                                |             |                 |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |
| 3 ) Change                        |                                    |                                | -           |                 |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |
| 4) Change                         |                                    |                                |             |                 |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |
| 5) Chuan                          |                                    |                                |             |                 |
| 5) Change                         |                                    | _                              |             |                 |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |
| 6) Change                         |                                    | _                              |             | <u></u>         |
| Add                               |                                    |                                |             |                 |
| Remove                            |                                    |                                |             |                 |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)   |
|---|
| Article III   |
| The specific purpose for which this corporation is organized is exclusively for charitable purposes, including, for such      |
| purposes, making of distributions to organizations that qualify as exempt organizations described 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(e)(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 of by a court of competent jurisdiction in the county in which the principal 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.   |
|   |
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|   |

| March 23, 2017   |                           |
|--|---------------------------|
| The date of each amendment(s) adoption:  | , if other than the       |
| late this document was signed.   |                           |
| N/A  |                           |
| Effective date if applicable:  | <del></del>               |
| (no more than 90 days after amendment file date)   |                           |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.  | rill not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                           |
| The amendment(s) was/were adopted by the members and the number of votes east for the amendment() was/were sufficient for approval.  | s)                        |
| 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  |                           |
| Signature Marker Walter  |                           |
| (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) |                           |
| Charles Walker, Sr.  |                           |
| (Typed or printed name of person signing)  |                           |
| President  |                           |
| (Title of person signing)  |                           |