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COVER LETTER

TO: Amendment Section Division of Corporations

FL NAME OF CORPORATION:	ORIDA ASSET BU	ILDING COALITI	ON, INC	
N11000				
DOCUMENT NUMBER:				
The enclosed Articles of Amendmen	and fee are submit	tted for filing.		
Please return all correspondence con	cerning this matter t	to the following:		
Pamela A. Tedesco				
	()	Name of Contact Per	rson)	
		(Firm/ Company))	
113 S. Monroe Street				
		(Address)		
Tallahassee, FL 32301				
	(C	City/ State and Zip C	Code)	-
pam@nbbsc.org				
E-mail ac	dress: (to be used fo	or future annual repo	ort notification)
For further information concerning t	his matter, please ca	II:		
Pamela Tedesco		al	850	201-7270
(Name	of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following	g amount made paya	ble to the Florida D	epartment of S	State:
		\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Str	eet Address	

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

FILE:

Articles of Amendment to Articles of Incorporation of

FI	ORIDA	ASSET	RUII	DING	COALITION.	INC

(Name of Corporation as curren	tly filed with the Florida I	Dept. of State)
N 11000004642		
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statuto amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pro	ofit Corporation adopts the following
A. If amending name, enter the new name of the corporation NATIONAL ASSET BUILDING COALITION, INC	ion:	The con-
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	113 S. MONROE STREE	T
Principal office address <u>MUST BE A STREET ADDRESS</u>)	TALLAHASSEE, FL 323	
		<u> </u>
C. Enter new mailing address, if applicable:		면, 물 유가 연
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		r the name of the
Name of New Registered Agent:		
N	(Florida	street (uldress)
New Registered Office Address:		
	(City)	, Florida (Zip Code)
Non-Bosinson de Company of the contract Designation		(,,
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		obligations of the position.
	ignature 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)

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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheet	g additional Articles, enter ts, if necessary). (Be specif	fic)			
Article III to now read:					
	ling Coalition's purpose is to				
partnerships, collaboratio	ons, and coordination of effor	ts for enhancing the q	uality of life and econor	nic opportunities for US	
communities of color that	t are impacted by natiural dis	asters, economic disa	sters and persistent pove	erty.	
					
			<u></u>		
		<u> </u>		<u> </u>	
		<u> </u>			

The date of each amendment(s) adoption:	if other than th
date this document was signed.	
8/17/18	
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 be document's effective date on the Department of State's records.	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 August 17, 2018 Signature Task a Lead	
(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)	
Pamela A. Tedesco	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	