

N11000007019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

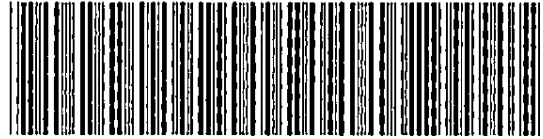
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NK & Amend

12/19/23--01017--005 **52.50

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2023 DEC 19 PM 12:57
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A. RAMSEY
JAN 12 2024



December 15, 2023

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment, Doc. No. N11000007019

To Whom It May Concern:

Enclosed, please find the Articles of Amendment to the Articles of Incorporation of Embrace Families Solutions, Inc. The Articles of Amendment should make three key changes to the organization:

1. Change in name to RISE Community Solutions, Inc.
2. Changes to Article III, Purpose
3. Changes to Article V, Registered Office and Agent

The Board of Directors met on December 15, 2023, and unanimously approved the Articles of Amendment.

Should you have any questions, you may contact our registered agent Gerard Glynn at (407) 234-0249. I can be contacted at (407) 473-3802 or Rebecca.Leininger@RiseCS.org.

Thank you!

Rebecca Leininger
Executive Director
RISE Community Solutions, Inc.
f/k/a Embrace Families Solutions, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Embrace Families Solutions, Inc.

DOCUMENT NUMBER: N11000007019

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

Please return all correspondence concerning this matter to the following:

Rebecca Leininger

(Name of Contact Person)

Embrace Families Solutions, Inc.

(Firm/ Company)

2200 Lucien Way, Ste. 325

(Address)

Maitland, FL 32751

(City/ State and Zip Code)

rebecca.leininger@risees.org

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

For further information concerning this matter, please call:

Gerard Glynn

407

234-0249

at

(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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2023 DEC 19 PM 12 58

Embrace Families Solutions, Inc.

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

N11000007019

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendments to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

RISE Community Solutions, Inc.

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)

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:

(Florida street address)

New Registered Office 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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <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)

ARTICLE III Purpose

DELETE "(a) acting as a network of local service providers who deliver a multitude of direct services to children; and"

INSERT "(a) providing direct and capacity building services which enhance the lives of vulnerable children, families and similar populations within the community; and"

DELETE "(b) identifying additional services that would be beneficial to children and families served by the child welfare

system in Central Florida, but that are beyond the scope of the Florida community-based care initiative."

ARTICLE V Registered Office and Agent

DELETE "The street address of the registered office of the Corporation is 4001 Pelee Street, 200, Orlando, FL 32817, and the name of its registered agent at such address is Gerard Glynn."

INSERT "The street address of the registered office of the Corporation is 2200 Lucien Way Ste. 325, Maitland, FL 32751 and the name of its registered agent at such address is Gerard Glynn."

The date of each amendment(s) adoption: December 12, 2023, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

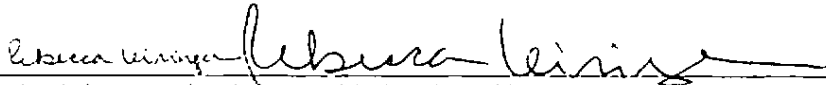
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 December 12, 2023

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)

Rebecca Leininger

(Typed or printed name of person signing)

Executive Director

(Title of person signing)