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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tow NAME OF CORPORATION:	n & Gown Cou	ncil at the Unive	rsity of C	entral FI	orida, Inc.	
N110000 DOCUMENT NUMBER:	09180					
The enclosed Articles of Amendment	and fee are subn	mitted for filing.				
Please return all correspondence conc	erning this matte	er to the following:	;			
Laura L. Pooser						
		(Name of Contact	t Person)			
Town & Gown Council at UCF, Inc	;.					
		(Firm/ Comp	any)			
University of Central Florida, Apoll	o Mail Center,	PO Box 165609	ı			
		(Address	)	•		<u> </u>
Orlando, FL 32816-5609						
		(City/ State and Z	lip Code)			
llpooser75@gmail.com						
E-mail add	ress: (to be used	for future annual	report no	tification	)	
For further information concerning the	s matter, please	call:				
Laura Pooser			407		257-6685	
(Name of	Contact Person	)			(Daytime Telep	hone Number)
Enclosed is a check for the following	amount made pa	yable to the Florid	da Departi	ment of S	tate:	
	75 Filing Fec & ficate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	

## **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

#### Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Flor	ida Dept. of State)	
N11000009180			
(Document Num	ber of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not Fo</i>	r Profit Corporation adop	ots the following
A. If amending name, enter the new name of the corpora	tion:		
			The new
name must be distinguishable and contain the word "corpord" (Company" or "Co." may not be used in the name.	ition" or "incorporated	I" or the abbreviation "Co	orp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	(1)		
C. Enter new mailing address, if applicable:			2019
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		,	JUL 29
			6. P
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	ice address in Florida, address:	enter the name of the	- ι Γ
Name of New Registered Agent:			<del></del>
	(F)	lorida street address)	
New Registered Office Address:			
		, Florida	
	(City)	íZip Coo	te)
New Registered Agent's Signature, if changing Registered losereby accept the appointment as registered agent. I am for		the ohligations of the pos	ition.
	Cinnatura of Alam Davis	tored Auent 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 Doc 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>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Susan Vernon-Devlin	3821 Orange Lake Dr.
Add			Orlando, FL 32817
X Remove			
X 2) Change	P 	Laura Pooser	UCF, Apollo Mail Center
Add			PO Box 165609
Remove			Orlando, FL 32816
3 ) Change	<u> </u>	Tiffany Sanders	4424 Lower Park Rd.
Add			Unit 1301
X Remove			Orlando, FL 32814
4) Change	V	JJ Mackle	UCF, Apollo Mail Center
X Add			PO Box 165609
Remove			Orlando, FL 32816
5) Change	S	Dawn Ofodile	UCF, Apollo Mail Center
Add		<u> </u>	PO Box 165609
X Remove			Orlando, FL 323816
6) Change	\$	Laura Haag	UCF, Apollo Mail Center
X Add			PO Box 165609
			Odando El 32816

# 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>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Т	Brenda Thompson	UCF, Apollo Mail Center
Add			PO Box 165609
X Remove			Orlando, FL 32816
2) Change	T	Nancy Wolf	UCF, Apollo Mail Center
X Add			PO Box 165609
Remove			Orlando, FL 32816
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

	April 16, 2019	
The date of each amendn		, if other than the
date this document was sig	ned.	
	July 1, 2019	
Effective date <u>if applicab</u>		<u> </u>
	(no more than 90 days after amendment file date)	
	n this block does not meet the applicable statutory filing requirements, this date will on the Department of State's records.	I not be listed as the
Adoption of Amendment	( <u>CHECK ONE</u> )	
■ The amendment(s) was was/were sufficient for	is/were adopted by the members and the number of votes cast for the amendment(s) r approval.	
☐ There are no members adopted by the board	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
<b>J</b> u Dated	ly 24, 2019	
Signature	Laura J. Joover	
	the chairman or vise chairman of the board, president or other officer-if directors	
	we not been selected, by an incorporator – if in the hands of a receiver, trustee, or elected receiver fiduciary by that fiduciary)	
011	er evaluappointed inductary by that inductary)	
	Laura L. Pooser	
	(Typed or printed name of person signing)	
	President, Town & Gown Council at UCF, Inc.	
	(Title of person signing)	