N 11000009614

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section **Division of Corporations**

> P.O. Box 6327 Tallahassee, FL 32314

Grand Bassa Cour	nty Association in the Ar	mericas, Inc.	
N11000009614 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ıbmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Jerome Gayman			
<u> </u>	(Name of Contact Pe	rson)	
Grand Bassa County Association in the Americas,	lnc.		
	(Firm/ Company)	
2555 Creekside Drive, Fort Pierce, FL 34981			
	(Address)		
Fort Pierce, fl 34981			
	(City/ State and Zip (Code)	
jzg1130@yahoo.com			
E-mail address: (to be us	sed for future annual rep	ort notification	1)
For further information concerning this matter, plea	se call:		
Jerome Gayman	at	772-940-287	1
(Name of Contact Pers		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	Department of	State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of Statu	& \$\square\$\$ \$\square\$\$ Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Am Div	eet Address endment Sect vision of Corpo fton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Grand Bassa County Association in the Americas, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N11000009614 (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 amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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. N/A 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: (Flörida street address) New Registered Office Address: , Florida (City) (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 <math>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	PT John Do Y Mike Jo SV Sally St	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	S	Elliott Virgin	1020 South 8th Street,
Add			Fort Pierce, Fl 34950
X Remove			
2) Change	<u>s</u>	Delores H. Johnson	429 N 19th Street,
X Add			Fort Pierce, FI 34950
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Romove			

E: If amending or adding additional Articles; enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
n/a					

	11-4-2015	
The date	e of each amendment(s) adoption:	, if other than the
date this	document was signed.	
Effective	e date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	the date inserted in this block does not meet the applicable statutory filing requirements, this date's effective date on the Department of State's records.	te will not be listed as the
Adoptio	n of Amendment(s) (CHECK ONE)	
	e amendment(s) was/were adopted by the members and the number of votes cast for the amendments/were sufficient for approval.	ent(s)
	ere are no members or members entitled to vote on the amendment(s). The amendment(s) was/wopted by the board of directors.	ere
	11-4-2015 Dated	
	6	
	Signature Weldres A. Johnson	
	(By the chairman or vice chairman of the board, president or other officer-if direct	
	have not been selected, by an incorporator — if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	, or
	,,,,,,	
	Delores H. Johnson	
	(Typed or printed name of person signing)	_
	Delores H. Johnson Vice Chairman of Box	rd
	(Title of person signing)	