N11656

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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12 AHG -6 PM 2: 32

Amend

AUG 0 9 2012 T. CAULEY

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Grace Jones Community Center Inc
DOCUMENT NUMBER: N 11656
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Randy Lewis (Name of Contact Person)
Grace Jones Community Conter Inc (Firm/Company)
230 41st ST. (Address)
Marathon Fl. 33050
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Randy Lewis at (305) 393 0300 (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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation
of 12 AUG -6 PM 2: 32
Grace Tanes Commits Contex Til
(Name of Corporation as currently filed with the Florida Dept. of State)
NI II)
N 11656
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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 <u>MUST BE A STREET ADDRESS</u>)

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: Kandy Leusis
$1 M_{\odot} \sim 0.11 \sim 0.0$
(Florida street address)
New Registered Office Address:
Marathon, Florida 33050
(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
Page 1 of 4

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	PT John I V Mike SV Sally	Jones	SECRETALLASIA
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address 5 SR
1) Change Add	CP	Banks Andie	58396 OVERSESHUR Mare thon Fl. 33050
Remove 2) Change	CP	Ringmann Robin	1819 Growser Dr
Add		J	1819 Grouper Dr Ulrathon Fl 33050
Remove 3) Change Add	<u>P</u>	Lewis Randy	1 Man O War Dr Marathon Fl 33050
Remove			
4) Change	<u> </u>	Hernstadt Jessie	Marathon Fl 33050
Remove		landa T	a - 1/12 ST
5) ChangeAdd		Langley Judy	900 W. 63rd St. Ocaon Marathon Fl. 33050
Remove			
6) Change			
Remove			

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

•	If amending or adding additional Arti (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	12 AUG - 6 PM	2: 32
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The date of each amendment(s) adoption:				
Tective date if applicable:				
(no more than 90 days after amendment file date)				
doption 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 Au 2nd 2012 Signature				
(By the chairman or view 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)				
(Typed or printed name of person signing)				
Tresident (Title of person signing)				