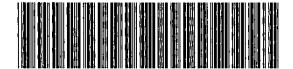
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(Rec	questor's Name))
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(City	//State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	es of Status
Special Instructions to F	Filing Officer:	

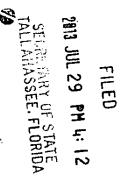
Office Use Only



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30/13

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Percell Marc Maynor Memorial Scholar- Ship, INC
DOCUMENT NUMBER: N/20000317/
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Percell M. Maywor, Sr. (Name of Contact Person)
Percell Marc MayNor Memorial Scholarship, INC
1832 Millstone Manor (Address)
Conyers, Ga. 300/3 (City/ State and Zip Code)
mri/ey/16 be//south. Net Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 629-7272 (Name Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy. (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) Certified Copy (Additional Copy is Enclosed)

TO: Amendment Section

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

FI	LEU	

	of	FILLU
		Sch away 34,73
(Name of Corporation as currently filed with the F	lorida Dept. of State)	OF SOMETHRY OF S
N/20000	03/7/	SECRETARY OF S TALLAHASSEE. FL
(Document Number of Corpo	oration (if known)	78
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit	Corporation adopts the following
a. If amending name, enter the new name of the corpora	<u>ıtion:</u>	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the	abbreviation "Corp." or "Inc."
Company or Co. may not be used in the name.	.1/ 1	
3. Enter new principal office address, if applicable:	N/H	
Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>(</u>)	
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/H	
). <u>If amending the registered agent and/or registered of</u>	flac adduses in Flavida, antau th	as manns of the
new registered agent and/or the new registered office		e name of the
W. CW. B	$-\frac{1}{4}$	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
TEN REGISTER EU OFFICE AUTHESS.		
	, Fl	orida
(City	?)	(Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:	
hereby accept the appointment as registered agent. I am f	familiar with and accept the oblig	zations of the position.
Signature of New Reg.	istered 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	e, 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	Treasure	r-Mary Riley	224/ Rock Island Rd. Margate, FL. 33063
X Add	Secretary	-Dorothy Cooper	9060 N.W. 12th 5t. Plantation, FL.
Remove 3) Change Add	<u>V. P.</u>	Judy Tolbert	33329 9963 N.W. 2Nd Court Plantation, FL. 33324
Add	A55 <u>f. C.F</u> 0	Romona Jones	625 Lakeview Dr. Coral Springs, FL.
		 	3307/
Remove 6) Change			
Add Remove			

amending or adding additional Art tach additional sheets, if necessary).	(Be specific)	
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	NA	
	NIA	
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Effective date if applicable: 7/10/20/3 (no more than 90 days after amendment file date) 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 7/10/13 Signature 1/10/13 Signature 1/10/13 Signature 1/10/13 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
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 Dated Parall H. Hamman, L. C. E. O. (By the chairman or vice chairman of the board, president or other officer-if directors
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 Dated Parall H. Hayman, L. C. E. O. (By the chairman or vice chairman of the board, president or other officer-if directors
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 Dated Percoloft. Haynon, L. C. E. O. (By the chairman or vice chairman of the board, president or other officer-if directors
Dated 7/10/13 Signature Porcol H. Maynon, Qr., C. E. O. (By the chairman or vice chairman of the board, president or other officer-if directors
Signature Percelo H. Haynon, Sr., C. E. O. (By the chairman or vice chairman of the board, president or other officer-if directors
(By the chairman or vice chairman of the board, president or other officer-if directors
other court appointed fiduciary by that fiduciary)
Percell M. May Nor, 5r.
(Typed or printed name of person signing)
(Title of person signing)