

N1200000 6547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

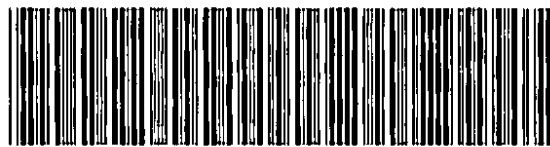
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500340924735

02/24/20--0100--001 44.73

FILED
2020 APR -9 AM 10:07
SPOKANE, IDAHO
FALL 2020

cc
Amend/Name
Chg

APR 09 2020
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lauderhill Regional Chamber of Commerce Foundation, Inc.

DOCUMENT NUMBER: N12000006547

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

Please return all correspondence concerning this matter to the following:

Michele Pemberton

(Name of Contact Person)

Absolute Accounting

(Firm/ Company)

4801 S. University Drive, Ste 217,

(Address)

Davie, FL 33328

(City/ State and Zip Code)

m_pember@absoluteaccountingcpa.com

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

For further information concerning this matter, please call:

Michele Pemberton

754

300-9740

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 checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input 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



2020/03/18 10:55

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2020

MICHELE PEMBERTON
4801 S. UNIVERSITY DRIVE
STE. 217
DAVIE, FL 33328

SUBJECT: LAUDERHILL REGIONAL CHAMBER OF COMMERCE
FOUNDATION, INC.
Ref. Number: N12000006547

We have received your document for LAUDERHILL REGIONAL CHAMBER OF COMMERCE FOUNDATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please sign the form in your actual legal signature in the space provided.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 020A00005960

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Articles of Amendment
to
Articles of Incorporation
of

FILED
2020 APR -9 AM 10:07
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

Lauderhill Regional Chamber of Commerce Foundation, Inc.

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

N12000006547

(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:

Moving Communities Forward Foundation, 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:

4300 N. University Drive

(Principal office address **MUST BE A STREET ADDRESS**)

Suite F-100

Sunrise, FL 33351

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

Same as principal address

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:

Absolute Accounting

4801 S. University Dr, Suite 217

(Florida street address)

New Registered Office Address:

Davie


(City)

Florida 33328

(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

(attach additional sheets, if necessary). (Be specific)

[illegible]

Page 3 of 4

The date of each amendment(s) adoption: _____, 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 February 10, 2020 _____

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)

Coleen Gutzmore

(Typed or printed name of person signing)

Officer of the Board of Directors

(Title of person signing)