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(Re	equestor's Name)	
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C. CARROTHERS

TO: Amendment Section Division of Corporations								
NAME OF CORPORATION: UNITED	for A GOOD CAUSE 3HC.							
DOCUMENT NUMBER: 1200	000\$230							
The enclosed Articles of Amendment and fee are submitted for filing.								
Please return all correspondence concerning this matter	to the following:							
Davis -	TRIANA							
	(Name of Contact Person)							
UNITER	S FOR A GOOD CAUSE WC.							
	(Firm/ Company)							
2210	(Address)							
	(Address)							
NAVAC	QE FV 32566 (City/ State and Zip Code)							
dt4 AL	2750 gmail com							
For further information concerning this matter, please of	pall:							
DAVID TRIAND	at (850) 368-3505 (Area Code & Daytime Telephone Number)							
(Name of Contact Person)	(Area Code & Daytime Telephone Number)							
Enclosed is a check for the following amount made pay	able to the Florida Department of State:							
S35 Filing Fee M\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 Clifton Building 2661 Executive Center Circle Tällähässee, FL 32301							

Articles of Amendment to

Articles of Incorporation

FOR A GOUD COUSE BUC. Name of Corporation as currently filed with the Florida Dept. of State) N 120 0000 8230 (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: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp "Company" or "Co." may not be used in the name. 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. (Florida street address) New Registered Office Address: Florida

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

New Registered Agent's Signature, if changing Registered Agent:

If amending the Of	ficers and/or	Directors, enter the tit	ie and name of each officer/director being removed and title, name, and
address of each Off	icer and/or D	Firector being added:	
(Attach additional sh	ieets, if neces	sary)	
Please note the office	er/director titi	le by the first letter of the	office title:
	FO = Chief F	inancial Officer. If an o	etary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief fficer/director holds more than one title, list the first letter of each office
a change, Mike Jone	s leaves the c		tly John Doe is listed as the PST and Mike Jones is listed as the V. There is s named the V and S. These should be noted as John Doe, PT as a Change,
Example:			
X Change	PΤ	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	Title	<u>Name</u>	Address

X Ãđđ	SV Sall	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l)Change			
Add			
2) Change			
Add			
3) Change			
Remove			
4) Change	A44 ****		
Remove			
5) Change			
Add			
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I	i	The date of each amendment(s) adoption: date this document was signed.	, if other than the
		Effective date if applicable: 1981 4 2014 (no more than 90 days after amendment file date)	_
		Adoption of Amendment(s) (CHECK QNE)	
		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 30 JUN 2014	
		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)	
		DAVID TRIANA	
		(Typed or printed name of person signing)	
		CHRICMAN	
		(Title of person signing)	