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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	OOD ASSOCIATION, I	NC.	
N12000008812			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
ROSABELLA E. DEMILLE			
	(Name of Contact Perso	n)	
4EVER40 SISTERHOOD ASSOCATION, INC.			
	(Firm/ Company)		
13215 WASHINGTON AVE			
	(Address)		
LARGO, FL 33773			
	(City/ State and Zip Cod	le)	
rdemille@4ever40sisterhood.org			
E-mail address: (to be used	for future annual report	notification	1)
For further information concerning this matter, please	call:		
ROSABELLA E. DEMILLE	72	.7	4818733
(Name of Contact Person)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of	State:
■ \$35 Filing Fee		Certifi Certifi) Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations	Amen	Address dment Secti on of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

4EVER40 SISTERHOOD ASSOCIATION, INC.

4EVER40 SISTERIROOD ASSOCIATION, INC.		
(Name of Corporation as currently filed with the Florida I	Dept. of State)	,,,,
N12000008812		<u></u>
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corporation</i> adop	its the following
A. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Co	orp." or "Inc."
B. Enter new principal office address, if applicable:	8831 STE 6, 49TH STREET N.	
(Principal office address MUST BE A STREET ADDRESS) PINELLAS PARK, FL 33782	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13215 WASHINGTON AVE.	
	LARGO, FL 33773	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		
Name of New Registered Agent:	NIA	
New Registered Office Address:	(Florida street address)	
	. Florida	
	(City) (Zip Code	e)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		tion
i neveny accept inc appointment as registerea agent. I am jai	таан wun ana ассерг те отцеановх ој те рохи	uou.
Si	gnature of New Registered Agent, if changing	
o.,	Commence of the commence of th	

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 adaitional 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add	Р		Elisa B. Nettle	47 Thurnstone Dr. Safety Harbor, FL 34695
A Remove 2) Change Add	Ъ	_	Cynthia Antonio	629 Flaven Place Tarpon Springs, FL 34689
Remove 3) Change Add X Remove	VP	_	Rosario Grav	6681 121 Ave. NApt E Largo, FL 33773
4) <u>×</u> Change × Add	CEO		Rosabella E. Demitle	13215 Washington Ave. Largo, FL 33773
Remove 5) Change Add		_		
Remove 6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee			cles, enter change(s) here: (Be specific)	
			MIN	

	•			
				
				-
			•	
	,			
				
				
The date of each amendment(s) date this document was signed.	adoption:			, if other than the
06	/06/20			
Effective date <u>if applicable</u> :	(no more than 90 de	ays after amendment	file date)	
Note: If the date inserted in this	block does not meet the appl	icable statutory filing		e will not be listed as the
document's effective date on the l	pepartment of State's record	18.		

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.

Б. Т	06/06/2020
Dated	
Signatu	re chartens
	(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)
	CYNTHIA ANTONIO
	(Typed or printed name of person signing)

(Title of person signing)