## N13000002841

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SECRETARY OF STATE TALLATIANSEE, FLORIDA

OCT -2 2013 T. CARTER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Frederick	Leadership	Initiative, Inc.
DOCUMENT NUMBER: N130000028	341	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Sabrina Covington		
	(Name of Contact Person	1)
Covington+ Associates, C	PAs INC.	
	(Firm/ Company)	
155 Cranes Roost Blvd, S	Suite 2010	
	(Address)	
Altamonte Springs, FL 32	701	
	(City/ State and Zip Cod	e)
scovington@covin		
E-mail address: (to be used	·	notification)
For further information concerning this matter, please	call:	
Sabrina Covington	<sub>at (</sub> 407	475-1000
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
☐ \$35 Filing Fee  ☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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	Ameno Divisio Cliftor	Address  Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



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Frederick Leadership Initiative	, Inc.	10 021 124	
(Name of Corporation as currently filed v	with the Flo	rida Dept, of State)	_
N13000002841			
(Document N	umber of Co	prporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	rs, this Florida Not For Profit Corporation adopts th	e following
A. If amending name, enter the new name of the	<u>1e corporati</u>	on:	
N/A			The new
		tion" or "incorporated" or the abbreviation "Corp.	
"Company" or "Co." may not be used in the nan		N/A	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).		,	_
(criticipal oggico dadrono <u>integral da ricarda y</u>	<u>100100</u> )		<del>_</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	N/A	_
			_
D. If amending the registered agent and/or reg			
new registered agent and/or the new register		ddress:	
Name of New Registered Agent: N/A			
New Registered Office Address:		(Florida street address)	
New Registered Office Address.			
	(City)	, Florida(Zip Cod	dat
	(Cily)	(Σιρ Coc	ie)
New Registered Agent's Signature, if changing		Agent: miliar with and accept the obligations of the position	,
Thereby accept the appointment as registered age	m. rum jui	miliar with and accept the obligations of the position	•
Signa	ture of New	Registered Agent, if changing	
วเขาน	AND COLUMN	AND ADDRESS OF LIKE STATE OF THE STATE OF TH	

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	<u>V</u> <u>Mik</u>	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Co-Chair	Charles J. Hawkins, II	Orlando, FL 32804
2) Change Add	Co-Chair	John Martinez	105 W New Hampshire St Orlando, FL 32804
Remove 3)Change	Treasurer	Sabrina Covington	155 Cranes Roost Blvd, Suite 2010 Altamonte Springs, FL 32701
4) Change	Secretary	Chrissy Garton	105 W New Hampshire St Orlando, FL 32804
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
N/A	
•	

The date of each a date this document	amendment(s) adoption: 03/22/2013	_, if other than the
Effective date <u>if a</u>	03/22/2013	
incerive date <u>ir a</u>	(no more than 90 days after amendment file date)	<del></del>
Adoption of Ame	ndment(s) ( <u>CHECK ONE</u> )	
	ent(s) was/were adopted by the members and the number of votes cast for the amendment(s) ficient for approval.	
adopted by th	ature  (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)	_
	Sabrina Covington	
	(Typed or printed name of person signing)	
	Treasurer, CEO of Covington+ Associates, CPAs Inc.	
	(Title of person signing)	

NHA DUNG T LE
MY COMMISSION #FF029791
EXPIRES June 20, 2017
FioridaNotaryService.com