

# NI3000003311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

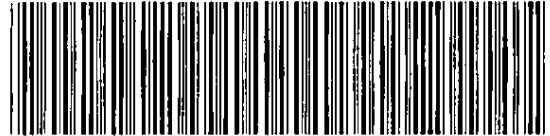
(Document Number)

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2024 OCT 28 PM 2:14  
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CLERK OF COURT

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Employment Network of SW FL, Inc.

DOCUMENT NUMBER: N13000003311

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

Please return all correspondence concerning this matter to the following:

Idela T. Hernandez

(Name of Contact Person)

Employment Network of SW FL

(Firm/ Company)

3050 Horseshoe Dr. North Suite 158

(Address)

Naples, FL 34104

(City/ State and Zip Code)

idelah@ENworks.org

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

For further information concerning this matter, please call:

Idela T. Hernandez 239 452-4020  
(Name of Contact Person) at (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 checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Employment Network of SW FL, Inc.

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

N13000003311

(Document Number of Corporation (if known))

FILED  
2024 OCT 28 PM 2:00  
FLORIDA  
TALLAHASSEE

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:

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:  
(Principal office address MUST BE A STREET ADDRESS)

2271 19th ST SW

Naples, FL 34117

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

3050 Horseshoe Dr. North

Suite 158

Naples, FL 34104

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: Idela T. Hernandez

2271 19th ST SW

(Florida street address)

New Registered Office Address:

Naples

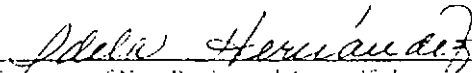
(City)

Florida 34117

(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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Ibel Pinera</u>	<u>6970 BIRD ROAD</u> <u>Miami, FL 33166</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Dixibeth H. Villarraga</u>	<u>741 ALLEGHENY AVE</u> <u>GLEN BURNIE MD 21060</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Dixidela Dent</u>	<u>6970 BIRD ROAD</u> <u>Miami, FL 33166</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>BOD/P/S</u>	<u>Idela T. Hernandez</u>	<u>2271 19th ST SW</u> <u>Naples, FL 34117</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DOB/VP</u>	<u>Jazmin Molina</u>	<u>2565 37th Ave NE</u> <u>Naples, FL 34120</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>BOD</u>	<u>Victor Presto</u>	<u>2303 QUEENS BLVD</u> <u>Naples, FL 34112</u>

**F. If amending or adding additional Articles, enter change(s) here:**

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

ADD - BOD: Heidi Wilson      Address: 1332 Ridge ST Naples, FL 34103

ADD - BOD: Ted Wolfendale      Address: 4151 Skates Circle Fort Myers, FL 33905

ADD - BOD: Wayne Kahn      Address: 5060 Yacht Harbor Circle #201 Naples, FL 34112

ADD - BOD: Laura Severyn      Address: 25566 Luci Dr, Bonita Springs, FL 34135

ADD - BOD: Carrie Drew      Address: 208 Sabal Lake Dr, Naples, FL 34104

10/18/2024

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

10/18/2024

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 10/18/2024 \_\_\_\_\_

Signature Idela Hernandez  
(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)

Idela T. Hernandez

\_\_\_\_\_  
(Typed or printed name of person signing)

President / S / BOD

\_\_\_\_\_  
(Title of person signing)

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Employment Network of SW FL, Inc.

DOCUMENT NUMBER: N13000003311

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

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(Name of Contact Person)

Employment Network of SW FL

(Firm/ Company)

3050 Horseshoe Dr. North Suite 158

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(City/ State and Zip Code)

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Articles of Amendment  
to  
Articles of Incorporation  
of

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Employment Network of SW FL, Inc.

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

N1300003311

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2271 19th ST SW

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

Naples, FL 34117

**C. Enter new mailing address, if applicable:**

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

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Suite 158

Naples, FL 34104

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Name of New Registered Agent:

Idela T. Hernandez

2271 19th ST SW

New Registered Office Address:

(Florida street address)

Naples

(City)

Florida 34117  
(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.*

*Idela Hernandez*  
Signature of New Registered Agent, if changing

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)

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10/18/2024

Dated \_\_\_\_\_

Signature Idela Hernandez  
(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)

Idela T. Hernandez

\_\_\_\_\_  
(Typed or printed name of person signing)

President / S / BOD

\_\_\_\_\_  
(Title of person signing)