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99 0 5 2021 S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BUHTONS and BOWS Foundation				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
(Name of Contact Person)				
Buttons and Bows DUTReach Community Center (Firm/Company)				
8633 N. Lexington Drive, (Address)				
Miramar Pl 33025 (City/State and Zin Code)				
(City/ State and Zip Code)				
E-mail address: (to be used for future annual report notification)				
E-mail address: (to begised for future annual report notification)  For further information concerning this matter, please call:				
(Name of Contact Person)  at 954-274-7532  (Area Code) (Daytime Telephone Number)				
(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:				
\$35 Filing Fee Satus   S43.75 Filing Fee & Certificate of Status   Certified Copy   Certificate of Status   Certified Copy   Certified Copy				
Mailing Address Street 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

## Articles of Amendment to Articles of Incorporation of

	ndation
(Name of Corporation as currently filed with the Florida I	Pept. of State)
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	OR:
Buttons and Bows DUHREAC	h Community Center The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	Linda Albury
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	8633 N. Lexington Drive
	Miramar Fi, 33025
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8633 N. Loxington Drive
	Miramar Pl 33025
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered a language languag	
	Ab
Sig	nature 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	ones	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change Add		-		
Remove				
2) Change Add		_		
Remove 3) Remove — Add Remove		_		
4) Change Add		-	····	
Remove				
5) Change Add		-		
Remove				
6) Change Add		-		
Remove				
E. If amending or addin (attach additional sheet	g additions.	nal Arti ssary).	cles, enter change(s) here: (Be specific)	
		•		
	·			

The date of each amendment(s) adoptic date this document was signed.	n:, if other than t	he
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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 1/29/20 <b>21</b>
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)
Linda Albury
(Typed or printed name of person signing)
President
(Title of person signing)