

N130000006194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

(Business Entity Name)

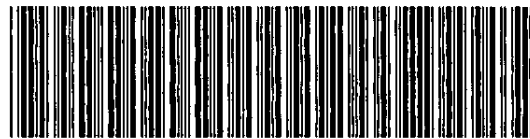
(Document Number)



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG - 1 PM 3:04

AUG - 5 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Adveniant Reguum Tuum, Inc.

DOCUMENT NUMBER: N13000006194

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

Please return all correspondence concerning this matter to the following:

W. Thornton Scott

(Name of Contact Person)

MacLean and Ema, PA

(Firm/ Company)

2600 NE 14th Street Causeway

(Address)

Pompano Beach, Florida 33062

(City/ State and Zip Code)

karenkennedy@maclean-ema.com

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

For further information concerning this matter, please call:

Karen E. Kennedy

(Name of Contact Person)

at (954) 785-1900

(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 type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FREDERICK R. MACLEAN
ANNE B. MACLEAN
CHRISTOPHER J. EMA
W. THORNTON SCOTT
LAURA G. MACLEAN
BRIAN V. BERGMAN

* ALSO ADMITTED IN KENTUCKY
** ALSO ADMITTED IN SOUTH CAROLINA

MACLEAN & EMA P.A.
Attorneys and Counselors at Law

OF COUNSEL
J. ALAN COX
TALLAHASSEE, FL

OF COUNSEL
ROBERT M. ARLEN
BOARD CERTIFIED
TAX ATTORNEY
DELRAY BEACH, FL

July 30, 2013

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

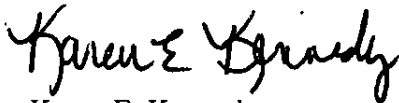
Re: Document No. N13000006194
Adveniant Reguum Tuum, Inc.

Gentlemen:

Enclosed please find Articles of Amendment to Articles of Organization for the above-referenced "Not For Profit Corporation," changing the spelling of its name. Also enclosed is our check in the amount of \$43.75 which represents the filing fee and fee for a certified copy of the Articles of Amendment. Please process the documents and send the certified copy to us in the stamped return envelope provided.

Should you have any questions regarding this transmittal, please do not hesitate to contact me.

Very truly yours,



Karen E. Kennedy
Legal Assistant

/kek

Enclosures: as noted

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG -1 PM 3:04

Adveniant Reguum Tuum, Inc.

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

N13000006194

(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:

Adveniat Regnum Tuum, Inc.

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)

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 _____
(City) (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 checked="" 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 type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

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

[illegible]

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

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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

7/29/13

Signature

✓ Frederick J. Brice

(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)

Frederick J. Brice

(Typed or printed name of person signing)

President

(Title of person signing)