

N/1300008308

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Amend.

10/23/13

DC

JOHN L. KORTHALS
Attorney at Law

700 East Atlantic Blvd., Suite 200
Pompano Beach, FL 33060

(954) 783-2999
FAX (954) 783-9832
jack@jkorthals.com

October 11, 2013

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

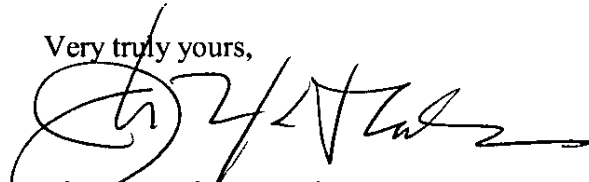
Re: Filing Articles of Amendment
Parents Coping After the Loss of a Child, Inc. (Non-profit)

To Whom It May Concern,

In regard to the above referenced matter, enclosed for filing please find an Articles of Amendment for Parents Coping After the Loss of a Child, Inc., a non-profit corporation. Also enclosed please find our Trust account check no. 13018, in the amount of \$35.00, which represents your filing fee.

Once filed, we ask that you please mail to our office the letter of acknowledgment in the envelope we have provided to you for your convenience. If you should have any questions, please do not hesitate to contact our office.

Very truly yours,



JOHN L. KORTHALS

JLK/ejp
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PARENTS COPING AFTER THE LOSS OF A CHILD, INC.

DOCUMENT NUMBER: N13000008308

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

Please return all correspondence concerning this matter to the following:

John L. Korthals, Esquire

(Name of Contact Person)

Law Office of John L. Korthals

(Firm/ Company)

700 E. Atlantic Blvd., Suite 200

(Address)

Pompano Beach, FL 33060

(City/ State and Zip Code)

jack@jkorthals.com

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

For further information concerning this matter, please call:

John L. Korthals, Esq

(Name of Contact Person)

at (954) 783-2999

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input 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

Articles of Amendment
to
Articles of Incorporation
of

PARENTS COPING AFTER THE LOSS OF A CHILD, INC.

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

N13000008308

(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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

Florida

(City)

(Zip Code)

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: October 10, 2013, 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 October 10, 2013
Signature Daisy Josey
(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)

Daisy Josey
(Typed or printed name of person signing)
Director
(Title of person signing)