# N 13000009061

Office Use Only



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SECRE SATES FLORIDA
TALLANIA SSEE FLORIDA

DEC 3 1 2013 C. CARROTHERS

### **COVER LETTER**

TO: Amendment Section Division of Corporations Urban NAME OF CORPORATION: N1300000 9061 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ulbantarmoutreach@amail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 248 ) 390-5937 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **■\$43.75** Filing Fee & **■\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy 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

(Additional Copy is

Enclosed)

### Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N1300000906	s I	至紹 -
N 13 0000 90 4 (Document Number of	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpora	ation:	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrev		₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩
name must be distinguishable and contain the word "corpor" (Company" or "Co," may not be used in the name.	ration" or "incorporated" or the abbreviation	"Corp." or Inc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	8068 Country Club 6+. Petersburg F	<u>Ro N</u> FL 33710
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1518 N. Long LK Pos Fenton M. 484	30
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:		<u>hę</u>
	(Florida street address)	
New Registered Office Address:	, Florida	
(Cit	y) , riotta	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am  Signature of Ne	ed Agent; familiar with and accept the obligations of the we Registered Agent, if changing	e position.

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 Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	<u>NP</u>	Tracy Brooks	1735 Third St Brighton M1 48116
2) Change	NP	Georgia Williamson	5715 Southward Que WATERFORD Mi 48329
Remove 3) Change Add	VP.	Allen Williamson	5715 Southward Que Waterford M. 48329
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
NA	
NHA	
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dat€	The date of each amendment(s) adoption: NP late this document was signed.				
Eff	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )			
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment proval.	(s)		
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.			
	Dated	Deboal R But President			
	Signature	Deboral R Buth Kesident	<del></del>		
	have r	chairman or vice chairman of the board, president or other officer-if director of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)			
		Deborat R Bunton			
		(Typed or printed name of person signing)			
		tresident	•		
		(Title of person signing)			