N13662

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COVER LETTER

TO: Amendment Section Division of Corporations 2019 JAN 22 PM 4: 30

NAME OF CORPORATION: Florida State Massage THEORETARY OF THE NAME OF CORPORATION:
NAME OF CORPORATION: 1 TO TELL OTO TELL TO THAT SOCIAL TO
DOCUMENT NUMBER: N13662
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Benbena prague (Name of Contact Person)
Florida State Massage Therapy Association, Inc.
3820 Northdale Blud. Suite 2054
Tempa, EL 33621 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bunbara oracue at 407 786 - 3307 (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 \$\begin{array}{c} \$\\$43.75 Filing Fee & \$\\ \end{array}\$\$ Certificate of Status

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

of .	
Florida State Massage Therapy Association,	Inc
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
(Document Number of Corporation (it known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following unendment(s) to its Articles of Incorporation:	
1. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. or "Inco" "Company" or "Co." may not be used in the name.	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Suitcle 205 A	
Tampa / FL 33624	
(Mailing address MAY BE A POST OFFICE BOX) 3820 Northdale Column	
Suite 205A	
Tampa, FL 33624	
 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	
ew Registered Agent's Signature, if changing Registered Agent: 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: X.Change X.Remove X.Add	<u>V</u> <u>Mik</u>	<u>1 Doe</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	ED	Neely, Gregory	978 Douglas Ave
Add		,	
X Remove			Altamente Springs, FL
2) Change			52 N7
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Churcu			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
ffective 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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendr was/were sufficient for approval.	ment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/adopted by the board of directors.	were
Dated X 1/15/2019	
Signature / Off Nahasky	
(By the chairman or vice chairman of the board, president or other officer-if dire have not been selected, by an incorporator — if in the hands of a receiver, truste other court appointed fiduciary by that fiduciary)	
1 Joyce Prahasky	
(Typed or printed name of person signing)	
Executive President	
(Title of person signing)	