12800000111

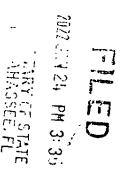
(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		J

Office Use Only



500379573265

08/13/21--01010--021 **35.00



V SULKER JAN 28 2072

COVER LETTER

RECEIVED

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

2022 JAN 24 PM 2: 12

NAME OF CORPORATION: Florida A&M	Law Review, Inc.		SECRETARY OF STATE TALLAHASSEE.FL
DOCUMENT NUMBER: N14000000851			
The enclosed Articles of Amendment and fee at	re submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
Olivia Garcia			
	(Name of Contact	Person)	
Florida A&M Law Review, Inc.			
	(Firm/ Compa	ny)	
201 FAMU Law Lane			
	(Address)	•	· · · · · · · · · · · · · · · · · · ·
Orlando, FL 32801			
	(City/ State and Zip	Code)	
famu.lr.bme@gmail.com			
E-mail address: (to b	e used for future annual re	eport notification	on)
For further information concerning this matter,	please call:		
Olivia Garcia	3	407	446-3691
(Name of Contact F		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida	Department o	f State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St		· Certi is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Sec livision of Corp he Centre of	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Florida A&M Law Review, Inc.				
Name of Corporation as currently filed with th	e Florida I	Dept. of State)		
N14000000851				
(Docu	ment Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the			ofit Corporation adopts the	following
11 and and figure, their the new hank of the				
name must he distinguishable and contain the word "Company" or "Co," may not be used in the nam		tion" or "incorporated" or	the abbreviation "Corp." (_The new or "Inc."
B. Enter new principal office address, if application	able:	201 FAMU Law Lane		
(Principal office address MUST BE A STREET		Orlando, FL 32801		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	201 FAMU Law Lane		2012
		Orlando, FL 32801	· ·	- (-; - (-;
			ا ا ا ا ا	ے۔
D. If amending the registered agent and/or reginew registered agent and/or the new registered.	istered offi red office s	ce address in Florida, ente	r the name of the	I PH
	Omar Sal		[*\co	<u>ښ</u> (
<u>Name of New Registered Agent:</u>	201 FAM	IU Law Lane	一 F E	
New Registered Office Address	**		street address)	
	Orlando		, Florida 32801	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing hereby accept the appointment as registered agen			bligations of the position.	
		/s/Omar Sale	em	
-	Si	gnature of New Registered A	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	PT V SV	John Do Mike Jo Sally Sr	ones .	
Type of Action (Check One)	Title		Name	Audress
1) Change Add		_		
Remove				
2) Change Add		-		
Remove 3) Change Add Remove		_		
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee			<u>cles, enter change(s) here</u> : (Be specific)	
		-		

		-
		<u>_</u>
		
		
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e listed as the
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 memiadopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.				
	Dated	1/16/2022				
	Signature	Olivia Garcia				
	•	(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)				
		Olivia Garcia				
		(Typed or printed name of person signing)				
		Business Managing Editor				
		(Title of person signing)				