N1400000/400

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nai	me)
(Doc	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	





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FLORIDA DEPARTMENT OF STATE Division of Corporations

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April 30, 2014

CHRISTINA E. CHAN USCG MOM IN NEED FUND, CORP. 27041 SEA BREEZE WAY WESLEY CHAPEL, FL 33544

SUBJECT: USCG MOM IN NEED FUND, CORP.

Ref. Number: N14000001400

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 314A00009198

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: USCG	Mominneed fund Cor
DOCUMENT NUMBER: N 14 COCC	1400
The enclosed Articles of Amendment and fee are submit	ated for filing.
Please return all correspondence concerning this matter t	to the following:
Christin	a Chan
(1)	Name of Contact Person)
	(Firm/ Company)
27041 S	ea Breeze Way
	(Address)
Wesley	Chapel FL 33544
E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please ca	
Christing Chan (Name of Contact Person)	at (<u>\$13</u>) <u>506-9678</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made paya	able to the Florida Department of State:
\$35 Filing Fee \$\Bigs\\$43.75 Filing Fee & Certificate of Status	1\$43.75 Filing Fee & Sertified Copy (Additional copy is enclosed) Sertified 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		<u>^</u>
	Articles of Incorporation		
	of .		二、《美艺
	need fund, cor	D.	
(Name of Corporation as currently file	d with the Florida Dept. of State)	1	
N1400014	100		
	Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Florida Not For	Profit Corporati	on adopts the following
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain the w		or the abbrevia	ion "Corp." or "Inc."
"Company" or "Co." may not be used in the n	<u>ame</u> .		
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		·	
	·		
		···	
C. Enter new mailing address, if applicable	:		
(Mailing address MAY BE A POST OFFIC			
		<u>-</u>	
			
D. If amending the registered agent and/or r		nter the name o	<u>f the</u>
new registered agent and/or the new regi	stered office address:		
Name of New Registered Agent:			
	•		
	(Florida street address)		
New Registered Office Address:			
		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changi	ng Registered Agent:		
I hereby accept the appointment as registered a		e obligations of	the position.
	•		
Sig	nature of New Registered Agent if cha	ngina	

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	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) 🗸 Change	7	Jane E. Greene	263 Farmington Am
Add			Cranston, RT 82920
Remove			
2) Change			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	···	· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)			
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		,			
			 		

date this	te of each amendment(s) adoption: s document was signed. ve date if applicable: (no more than 90 days after amendment file date)	, if other than the
Adoptic	on of Amendment(s) (<u>CHECK ONE</u>)	
	ne amendment(s) was/were adopted by the members and the number of votes cast for the amendmen as/were sufficient for approval.	t(s)
	nere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.	e
	Signature Signature The chairman or vice chairman of the board, president or other officer-if directo have not been selected, by an incorporator – if in the hands of a receiver, trustee, o	
	other court appointed fiduciary by that fiduciary) Chyistim F. Chan (Typed or printed name of person signing)	
	Treasurer (Title of person signing)	