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## **COVER LETTER**

TO: Amendment Section Division of Corporations

ZETA Amicae	of Jacksonville FL Inc
NAME OF CORPORATION:	
N14000006190	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee an	submitted for filing.
Please return all correspondence concerning this	matter to the following:
LaTresha M Williams	
	(Name of Contact Person)
ZETA Amicae of Jacksonville FL Inc	
	(Firm/ Company)
P.O. Box 41302	
	(Address)
Jacksonville FL 32203	
	(City/ State and Zip Code)
amicae.treasurer@gmail.com	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	olease call:
LaTresha M Williams	619 928-1234
	at
(Name of Contact P	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	nde payable to the Florida Department of State:
☐ \$35 Filing Fee	
Mailing Address	Street Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

ZETA Amicae Auxiliary of BETA ALPHA ZETA Chapter INC Jacksonville, FL

N14000006190				
(Docume	ent Number of	f Corporation (if known)		
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes, U	his <i>Florida Not For Proj</i>	it Corporation adopts the follo	owing
A. If amending name, enter the new name of the	corporation:	<u>L</u>		
ZETA Amicae Auxiliary of Jacksonville FL Inc		· · · · · · · · · · · · · · · · · · ·		} ∃ew
name must be distinguishable and contain the word	"corporation	" or "incorporated" or t	he abbreviation "Corp." or "!	元." 正。
"Company" or "Co." may not be used in the name.				<del>20</del>
D. E. A	_	l/A	2:	1
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET AL				<u>.</u>
Trucpus office names wood in A Other Ar	<u> </u>		တ္က တက	<b>D</b>
				<b>T</b>
				بب '
				w
Enter new mailing address, if applicable:		NA.	п: -	£_
(Mailing address MAY BE A POST OFFICE B	<u> </u>			
	<del>-</del>			
. If amending the registered agent and/or regist	tered office a	iddress in Florida, ente	r the name of the	
new registered agent and/or the new registere				
	Karen Britt			
Name of New Registered Agent:				
	3805 Moner	ricf Rd W		
N - D-sistered Office Address		(Florida	street address)	
New Registered Office Address.	Jacksonville		32209	
	JACKSOHVING		. Florida	
-		(City)	(Zip Code)	
		(	(Lip Code)	
ew Registered Agent's Signature, if changing R	egistered Ag	ent:		
hereby accept the appointment as registered agent.			obligations of the position.	
	7 \\	4-1-1-		
	MY	$\mathcal{M}_{\mathcal{M}}$	<del></del>	
		$IXX \longrightarrow I$		
	Sign	oture 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 Fxecutive 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 I V Mike SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	Р	LaToya Snow	7625 Ginder Court Jacksonville FL 32210
Remove 2) Change Add	Р	Appie Smith	3805 Monorief Rd W Jacksonville Fl 32209
X   Remove   3   Change   Add   X   Remove	V	Cynthia Chapman	3805 Moncrief Rd W Jacksonville Fl 32209
4) Clauge Add	<u>T</u>	LaTresha Williams	716 SID DR Jacksonville H 32218
Remove  5) Change Add	Т	Erica Artis	3805 Moncrief Rd W Jacksonville Fl 32209
Remove 6) Change Add	TR	Vickie Williams	3805 Moncriel Rd W Jacksonville FL 32209
E. If amending or adding (attach additional shee		icles, enter change(s) here: (Be specific)	
Change. TR. Herlen.	a Washington	3805 Moncrief Rd W. Jacksonville Ft 32209	

<del></del>		
		<u> </u>
		<del></del>
		<del></del>
	07.1	
The date of each amendment(s) adoptions date this document was signed.	27 January 2020 :	, if other than the
Effective date if applicable:	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does locument's effective date on the Department.	s not meet the applicable statutory filing requirements, this date will not of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

.

Dated	25 MKHUH 205D
Signatur	
	(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)
	Kareece Bell St. George
	-
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)  Chair Sponsor

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.