# N150000000468

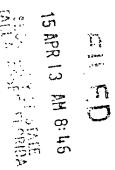
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(PRM) 11-14-15

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Northeast Flor	ida LGBT Leade	rship PAC, Inc.	
NAME OF CORPORATION:			ن <u>۱۳۰</u>
N1500000468		`.	- `. 
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		**************************************
Please return all correspondence concerning this mat	ter to the following:		-5 mg
Jimmy Midyette, Jr.			بن از ۱۱ کور ۱۱ کور
	(Name of Contact P	erson)	
	(Firm/ Compan	у)	
5683-2 Solomon Road			
	(Address)		
Jacksonville, Florida 32234			
	(City/ State and Zip	Code)	
jimmy.midyette@gmail.com			
E-mail address: (to be use	ed for future annual re	port notification)	
For further information concerning this matter, please	e call:		
Jimmy Midyette	904		
(Name of Contact Person)	at ((Are	ea Code & Daytime Telephone Numb	oer)
Enclosed is a check for the following amount made p	payable to the Florida	Department of State:	r
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status		Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ar Di Cl	reet Address nendment Section vision of Corporations ifton Building 61 Executive Center Circle	

Tallahassee, FL 32301

#### **Articles of Amendment**

## to Articles of Incorporation of

No	rtheast H	Florida / GBT L	EAdership PAC, I
(Name of Corporation as curren N15000000468	tly filed with the F	lorida Dept. of State)	/
(Doc	cument Number of	Corporation (if known)	
Pursuant to the provisions of section 617 amendment(s) to its Articles of Incorpora		ates, this <i>Florida Not For Prof</i>	it Corporation adopts the following
A. <u>If amending name, enter the new n</u> N/A	ame of the corpora	ation:	Th
name must be distinguishable and contai	n the word "corpor	ration" or "incorporated" or t	The new he abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in B. Enter new principal office address,		N/A	
Principal office address MUST BE A S		<u>(S</u> )	
			<del></del> 1
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		PO Box 380047	PR
(mauing address MAT DE AT OST	OFFICE BOX	Jacksonville, FL 322	
		<u></u>	7/- 2
			<u> </u>
D. If amending the registered agent an new registered agent and/or the ne			the name of the
Name of New Registered Agent:		zip code same RA	)
	5683-2 Solor	mon Road	
New Registered Office Address	•	(Florida street address)	
IVEW NERISIETER Office Pauress	Jacksonville		32234 Florida
	(Cit)	y)	(Zip Code)
New Registered Agent's Signature, if c			
hereby accept the appointment as regis.			ligations of the position.
	NIA	w Registered Agent, if changin	

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 te Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Carrington M. Mead	5683-2 Solomon Road
Add X Remove			Jacksonville, FL 32234
2) Change	T	Ben Weaver	5683-2 Solomon Road
Add			Jacksonville, FL 32234
X Remove X 3) Change	P	Jimmy Midyette, Jr.	5683-2 Solomon Road
Add			Jacksonville, FL 32234
Remove			
X 4) Change	TS	Keri P. Kidder	5683-2 Solomon Road
Add		•	Jacksonville, FL 32234
Remove			
5) Change	V	Marina Hodgini	5683-2 Solomon Road
X Add			Jacksonville, FL 32234
Remove			
6) Change			
Add			
Remove		D 2.44	

E. If amending or adding additions (attach additional sheets, if necess	ary). ,(Be spe	ecific)	<del></del> -		
N/A	•				
	• • • • • • • • • • • • • • • • • • • •				
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		March 28, 2015	
	e date of each amendment this document was signed		, if other than the
	ective date if applicable:	March 28, 2015	
		(no more than 90 days after amendment file date)	<del></del>
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) opproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Apri Dated	16, 2015	
	Signature		
	(By the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	<del></del>
	Jimmy M	lidyette, Jr.	
	Presiden	(Typed or printed name of person signing)	
		(Title of person signing)	