N15000004839

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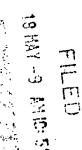
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COVER LETTER

TO: Amendment Section
Division of Corporations

ETA EPSILON CHAPTER OF SIGMA PLINC. NAME OF CORPORATION: N15000004839 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jonathan Ryals (Name of Contact Person) ETA EPSILON CHAPTER OF SIGMA PLINC. (Firm/ Company) 408 WEST COLLEGE AVENUE, UNIT 1 (Address) TALLAHASSEE, FL, 32301 (City/ State and Zip Code) El'AEPSILON3C@SIGMAPI.ORG E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jonathan Ryals (904)553-6745 (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:

Certified Copy

enclosed)

(Additional copy is

Mailing Address

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

\$35 Filing Fee \$\omega\$ \$35 Filing Fee & \$\omega\$\$ \$13.75 Filing Fee \$\omega\$\$

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Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

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Certificate of Status

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Articles of Amendment to Articles of Incorporation of

ETA EPSILON CHAPTER OF SIGMA PLINC. (Name of Corporation as currently filed with the Florida Dept. of State) N15000004839 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. 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 "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. 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: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

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>M</u> i	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	SGT	Aaron Melfi	408 WEST COLLEGE AVENUE
X Add			UNIT 1
Remove			TALLAHASSEE, FL, 32301
2) Change	Н	Will Brewton	408 WEST COLLEGE AVENUE
X Add			UNIT I
Remove			TALLAHASSEE, FL, 32301
3) Change	НМ	Andrew Reiter	408 WEST COLLEGE AVENUE
X Add			UNIT I
Remove			TALLAHASSEE, FL, 32301
4) Change	VPR	Tyler Kolby	408 WEST COLLEGE AVENUE
X Add			UNIT 1
Remove			TALLAHASSEE, FL, 32301
5) Change	·		
Add			
Remove			
6) Change	***		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)							
NA				-			
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			April 22, 2018	
The	date of each ame	ndment(s) add	pption:	, if other than the
date	this document was	s signed.		
Effe	ective date <u>if appl</u> i	icable:		
			(no more than 90 days after amendment file date)	
			k does not meet the applicable statutory filing requirements, this date will no artment of State's records.	ot be listed as the
Adoption of Amendment(s)		ent(s)	(<u>CHECK ONE</u>)	
	The amendment(s was/were sufficies		opted by the members and the number of votes cast for the amendment(s)	
	There are no men adopted by the bo		ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated	May 5, 2018		
	Signature		ear	
		have not been	nan or vice chairman of the board, president or other officer-if directors a selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
		Jonathan l	≷yals	
			(Typed or printed name of person signing)	
		Treasurer		
		-	(Title of person signing)	