## N 15000005797

(Requestor's Name)
(Äddress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



700296977717

Ü5/28/17--01022--018 \*\*∂9.00

SECRETARY OF STATE OF CORPORATIONS

2017 MAR 28 AM 4: 1.7

V HERRING MAR 2 9 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Florida Urban Homesteading Incorporated NAME OF CORPORATION:
N15000005797
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nikki Edditone
(Name of Contact Person)
Florida Urban Homesteading Inc.
(Firm/ Company)
8047 CR 561
(Address)
Clermont, Florida 34711
(City/ State and Zip Code)
nikki.edditone@floridaurbanhomesteading.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status    S52.50 Filing Fee Certificate of Status Certified 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 to Articles of Incorporation of

FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS

Florida Urban Homesteading Incorporated

2017 MAR 28 AM 4: 17

(Name of Corporation	as curren	tty filed with the Flor	ida Dept. of State)
N15000005797			
(Docur	nent Numb	er of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statuto	es, this <i>Florida Not Fol</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	e corporat	<u>ion:</u>	
	<del></del> -		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	d "corpora <u>e</u> .	tion" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		8047 CR 561	
		Clermont, Florida 34	711
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8047 CR 561	
		Clermont, Florida 34	711
D. If amending the registered agent and/or regi	stered offi	ce address in Florida,	enter the name of the
new registered agent and/or the new register	red office :	ıddress:	
Name of New Registered Agent:	Nikki Ed	ditone	
Name of New Registered Agent.	8047 CR	561	
	-		orida street address)
New Registered Office Address	:	•	
	Clermont		, Florida 34711
	<del></del>	(City)	(Zip Code)
New Registered Agent's Signature, if changing	Dagistarad	Agent.	
I hereby accept the appointment as registered ager	nt. I am fa	i Agent. imiliar with and a <del>c</del> cept	the obligations of the position.
		200	
-	5	Signature of New Regist	ered Asom if changing
		1/	

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>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	Patrick Tessier	1917A Haas Road
Add X Remove			Apopka, Florida 32712
2) Change	TS	Colene Tessier	1917A Haas Road
Add X Remove			Apopka, Florida 32712
3) Change	D	Timothy Ratliff	5869 Red Fox Drive
Add			Winter Haven, Florida 33884
X Remove			
4) Change	D	Nikki Edditone	8047 CR 561
X Add			Clermont, Florida 34711
Remove			
5) Change	D	LG Edditone	8047 CR 561
XAdd			Clermont, Florida 34711
Remove			
6) Change	D	Connie Stosberg	8047 CR 561
X Add			Clermont, Florida 34711
Remove			

E. If amending or adding additional Arti	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
1/0	
NA	
***************************************	
	<u></u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
3/17/2017 Dated	
Signature(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)	
Patrick Teisser	
(Typed or printed name of person signing)	
President	
(Title of person signing)	