

N15000006834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

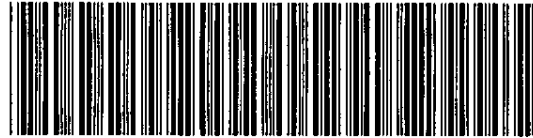
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



600275839416

*Name Change
& Amend*

08/10/15--01027--020 **52.50

FILED
2015 AUG 27 PM 3:37
CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 27 2015
A RAMSEY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2015

CAROLYN B. NORTON
CAROLYN BUTLER NORTON ESQ., LLC
2770 INDIAN RIVER BLVD - STE. 303
VERO BEACH, FL 32960

SUBJECT: INDIAN RIVER COUNCIL OF COMMUNITY SERVICE, INC.
Ref. Number: N15000006834

We have received your document for INDIAN RIVER COUNCIL OF COMMUNITY SERVICE, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 515A00017029

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INDIAN RIVER COUNCIL OF COMMUNITY SERVICE, INC.

DOCUMENT NUMBER: N15000006834

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROLYN B. NORTON

(Name of Contact Person)

CAROLYN BUTLER NORTON, ESQ. LLC

(Firm/ Company)

2770 INDIAN RIVER BLVD, Ste 303

(Address)

VERO BEACH, FL 32960

(City/ State and Zip Code)

CAROLYN@BUTLERNORTON.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROLYN B. NORTON

(Name of Contact Person)

at (772) 257-5751

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 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

IRC Council of Community Services

P.O. Box 1793

Vero Beach, Florida 32961-1793

August 20, 2015

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

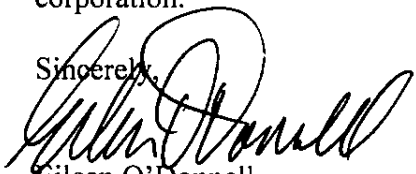
Re: Indian River County Council of Community Services, Inc. (dissolved)
Indian River County Council of Community Service, Inc. (new corporation)

Dear Sir/Madam:


Enclosed please find Amendment papers which were returned to us because the new corporate name is too similar to the dissolved corporate name.

Please be advised that, as officers of the dissolved corporation, we hereby assert that we do not intend to revoke the dissolution and that we release the name for the new corporation.

Sincerely,



Eileen O'Donnell
President



Carolyn Butler Norton
Treasurer

encl.

(772) 559-8485

Fax: (772) 231-1609

Email: carolyn@butlernorton.com

RECEIVED

15 AUG 26 PM 12:34

Articles of Amendment
to
Articles of Incorporation
of

FILED

2015 AUG 27 PM 3:37

(Name of Corporation as currently filed with the Florida Dept. of State)

INDIAN RIVER COUNCIL OF COMMUNITY SERVICE, INC.

(Document Number of Corporation (if known))

N15000006834

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

INDIAN RIVER COUNTY COUNCIL OF COMMUNITY SERVICE, INC.

The new 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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

EILEEN McDONALD

N/A

(Florida street address)

New Registered Office Address:

(City)

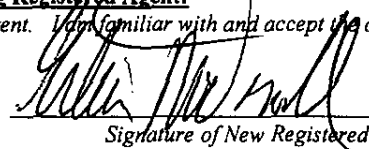
Florida

(Zip Code)

N/A

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.



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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>EILEEN O'DONNELL</u>	<u>7660 15th STREET</u> <u>VERO BEACH, FL 32966 US</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>EILEEN McDONALD</u>	<u>7660 15th STREET</u> <u>VERO BEACH, FL 32966 US</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

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 be listed as the document's effective date on the Department of State's records.

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.

Dated August 6, 2015

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)

CAROLYN BUTLER-NORTON
(Typed or printed name of person signing)

TREASURER
(Title of person signing)