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(Re	equestor's Name)	
(Ad	Idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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SECRETARY OF STATE

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MAY 30 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Kappa Psi Florida Alpha, Inc.
	00011646
DOCUMENT NOMBER. 72	
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Ti	revor pewell
	(Name of Contact Person)
Phi	(Firm/ Company)
	(Firm/ Company)
1920 1	Meritage Grove Circle Apt. 625
	(Address)
, .	
Tallahaq	(City/ State and Zip Code)
	(City/ State and Zip Code)
New c	11 trevor @ yahoo. Com
17-man address. (to th	t used for future aimed report notification?
For further information concerning this matter, p	dease call:
	/
Trevor Newell	erson) at (703) - 203 - 8465 (Area Code) (Daytime Telephone Number)
(Name of Contact P	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ide payable to the Florida Department of State:
\$35 Filing Fee \$\$43.75 Filing Fe	ee & □\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of St	
	(Additional copy is Certified Copy
	enclosed) (Additional Copy is Enclosed)
	melosedy
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clitton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	of
Phi Kappa Pb	the filed with the Florida Dept. of State)
(Name of Corporation as current	ly filed with the Florida Dept. of State)
N150000	
(Document Numbe	er of Corporation (if known)
ursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
If amending name, enter the new name of the corporation	on:
N/A	The new ion" or "incorporated" or the abbreviation "Corp," or "Inc."
ame must be distinguishable and contain the word "corporati Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A PEG T
	7
. Enter new mailing address, if applicable:	SEE 3
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: Tr	wor Newell
192	20 Meritage Grove Circle
New Registered Office Address:	,
	TAHA Florida 323C4- (Ciry) (Zip Code)
ew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent—I am fam	
	Town
Sig	gnature 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change Add	<u>P</u>	(0dy 600d	1920 Heritage Grove Circ. Tallehasse, FL 32304
Remove 2)	VP	Christian Martinez	1920 Heritage Grove Circ
Remove 3) Change Add	<u>SEC</u>	Trevor Newell	1920 Meritage Gran Circ. Tallahassee, FL 32304
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

ttach additional	idding additional A sheets, if necessary). (Be specifi	<u>c)</u>	:		
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l he date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file dat	<i>e)</i>
Note: If the date inserted in this block does not meet the applicable statutory filing require locument's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast fo was/were sufficient for approval.	r the amendment(s)
There are no members or members entitled to vote on the amendment(s). The amendr adopted by the board of directors.	ment(s) was/were
Dated <u>5/14/18</u>	
Signature	
(By the chairman of vice chairman of the board, president or other of have not been selected, by an incorporator – if in the hands of a recother court appointed (iduciary by that fiduciary)	
Trevor Neurell	
(Typed or printed name of person signing	ng)
Tressorer	
(Title of person signing)	