N15000011952

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations Pasco County National Organization for Women, Inc. NAME OF CORPORATION: N15000011952 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Edward Siegel (Name of Contact Person) Pasco County National Organization for Women, Inc. (Firm/ Company) 12053 Deertrack Loop (Address) Spring Hill, FL 34610 (City/ State and Zip Code) esiegel62947@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Edward Siegel 651-503-1606 (Name of Contact Person) (Area Code) (Davtime Telephone Number)

> Certified Copy (Additional copy is

enclosed)

Mailing Address

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

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

□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee &

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

≡\$52.50 Filing Fee

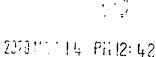
Certified Copy (Additional Copy is

Enclosed)

Certificate of Status

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) Pasco County National Organization for Women, Inc. (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: FL0365 Pasco County NOW, Inc. 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: _, Florida ___ (City) (Zip Code) 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove — Add — Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
F. If amending or addin (attach additional sheet		nal Articles, enter change(s) here: ssary). (Be specific)	
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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 <u>5/12/20</u>
Signature Column Sign
(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)
Edward Siegel
(Typed or printed name of person signing)
Treasurer
(Title of person signing)

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