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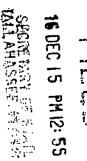
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | The Daisy Project, In | c. | | | |
|---------------------------------|---|--|--|---------------------------------------|--|
| DOCUMENT NUMBER: | N16000000945 | | | | |
| The enclosed Articles of Am | endment and fee are subm | nitted for filing. | | | |
| Please return all corresponde | ence concerning this matte | r to the following: | | | |
| Tricia Shinneman | | | | | |
| | | (Name of Contact Person | n) | | — |
| The Daisy Project, Inc. | | | | | |
| | | (Firm/ Company) | | | |
| 3418 Charlie Taylor Road | | | | | |
| | | (Address) | | · · · · · · · · · · · · · · · · · · · | |
| Plant City, FL 33565 | | | | | |
| | | (City/ State and Zip Code | e) | | |
| thedaisyprojectfl.com | | | | | |
| E | -mail address: (to be used | for future annual report i | notification) | 30 → | |
| For further information conc | erning this matter, please o | call: | | 6 DE | - |
| Tricia Shinneman | | 813 at | | 215 | |
| | (Name of Contact Person) | (Ar | ea Code) (Daytime Te | lephone Number) | 11 |
| Enclosed is a check for the for | ollowing amount made pay | yable to the Florida Depa | rtment of State: | lephone Number) | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| ■ \$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) | चूल ठ | Ĭ |

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

| (Name of Corporation as cu | rrently filed with | the Florida Dept. of State) | | |
|--|------------------------------|-----------------------------------|---|----------|
| N16000000945 | | | | |
| (Document N | Number of Corporat | ion (if known) | | |
| Pursuant to the provisions of section 617.1006, Florida Simendment(s) to its Articles of Incorporation: | tatutes, this <i>Florida</i> | Not For Profit Corporation a | dopts the fo | ollowing |
| . If amending name, enter the new name of the corp | oration: | | | |
| | | | | The new |
| name must be distinguishable and contain the word "cor Company" or "Co." may not be used in the name. | poration" or "inco | porated" or the abbreviation | "Corp." or | "Inc." |
| B. Enter new principal office address, if applicable: | | | | |
| Principal office address <u>MUST BE A STREET ADDRI</u> | ESS) | | | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | <u> </u> | | | |
| | | | | |
| | | | a medi Pagang garum | |
| | | · | 3200 | <u>6</u> |
| D. If amending the registered agent and/or registered | | lorida, enter the name of the | 温高 | EC |
| new registered agent and/or the new registered off | ice address: | | | <u></u> |
| Name of New Registered Agent: | | | | -69 |
| | | | 14. 1. | :2,1 |
| | | (Florida street address) | | <u></u> |
| New Registered Office Address: | | | 12.00 10.00 | ٠. |
| . | | , Florida | | |
| | (City) | (Zip C | Code) | |
| lew Registered Agent's Signature, if changing Registe | ered Agent: | | | |
| hereby accept the appointment as registered agent. I a | | l accept the obligations of the p | osition. | |
| | | | | |
| | | | | |
| | Signature of New | w Registered Agent, if changing | 7 | |

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 | PT John I V Mike SV Sally | <u>Jones</u> | |
|----------------------------------|---|------------------|---------------------------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | PT | Tricia Shinneman | 3418 Charlie Taylor Road |
| xx Add | ···· | - | Plant City, FL 33565 |
| Remove | | | |
| 2) Change | vs | Jason Shinneman | 3418 Charlie Taylor Road |
| ≭ ★ Add | | | Plant City, FL 33565 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| samending or adding additional Artitach additional sheets, if necessary). | (Be specific) |
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| | te this document was signed. | other than the |
|------|--|----------------|
| Effe | fective date if applicable: | |
| | (no more than 90 days after amendment file date) | • |
| | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be licument's effective date on the Department of State's records. | sted as the |
| Ada | loption 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 12/9/2016 | |
| | Signature Ovice Shennerman | |
| | (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) | |
| | Tricia Shinneman | |
| | (Typed or printed name of person signing) | |
| | President/Treasurer | |
| | (Title of person signing) | |