N/600000 1252

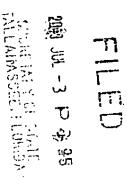
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

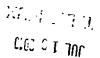




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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

FINAME OF CORPORATION: _	orida Academic A	dvising Associatio	n		
	00001252				
DOCUMENT NUMBER:					
The enclosed Articles of Amendme	ent and fee are subm	nitted for filing.			
Please return all correspondence ec	ncerning this matter	to the following:			
Tiffani Tallon					
	((Name of Contact Pe	erson)		
		(Firm/ Company	·)		
11200 SW 8th St - SASC-215					
		(Address)			
M iami, FL 33199					
	(City/ State and Zip	Code)		
financial@flacada.org					
E-mail a	ddress: (to be used	for future annual rep	ort notificati	on)	
For further information concerning	this matter, please of	rall:			
Tiffani Tallon		at		348-3848	
(Name	of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following	ng amount made pay	able to the Florida I	Department o	f State:	
□ \$35 Filing Fee ■\$4 Ce	3.75 Filing Fee & I rtificate of Status		Cert s Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)	
Mailing Address Amendment Sect Division of Corp P.O. Box 6327	ion	An Di	eet Address nendment Sec vision of Cor fron Building	ction porations	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

FILED

	to		
Artic	cles of incorporation		
Florida Academi	c Advising	Association-IR &	
(Name of Corporation as curr	rently filed with the Florida Dept	of State)	
$\Omega I(a\Omega$	01252	TALLAHASSEE, FLORID	
(Document Nu	mber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit C	Corporation adopts the following	
4. If amending name, enter the new name of the corpor	ration:		
		The new	
name must be distinguishable and contain the word "corpo	pration" or "incorporated" or the		
"Company" or "Co," may not be used in the name	, , , , , , , , , , , , , , , , , , ,	•	
B. Enter new principal office address, if applicable:	11200 SW 8th St SASC-215	i	
(Principal office address MUST BE A STREET ADDRESS	55) 4 51 22402	· 	
	Miami, FL 33199		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11200 SW 8th St - SASC-215		
(Making dauress MAT DE A POST OFFICE BOX)			
	Miami, Fl 33199		
_	· 		
D. If amending the registered agent and/or registered of	ffice address in Florida, enter the	name of the	
new registered agent and/or the new registered office			
Name of New Registered Agent:	Gonzalez		
11200	SW 8th St - SASC-215		
~ ~~	(Florida street	address)	
New Registered Office Address:		,	
Miami	<u> </u>	33199 , Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent:		
y conspense appearance a registered agent. The	in Januar with and accept the obliga	trons of the position,	
	the second		
 -	Signature of New Registered Agen	at of all marines	
	of the Mexistered Agen	u, ij enanging	

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	$\underline{\mathbf{V}}$ $\underline{\mathbf{Mil}}$	in Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	c	Jay Fuller	11200 SW 8 STREET
Add			SAAC 105A
X Remove			Miami, FL 33199
2) Change	ADMI	Mark Duslak	9501 US HIGHWAY 441
Add			LEESBURG, FL 34788
X Remove			
3) Change	Τ	Sonssire Tapanes	11200 SW 8 STREET, ZEB 210
Add			Miami, FL 33199
X Remove			
4) Change	C	Helen Gonzalez	11200 SW 8th St SASC-215
X Add			Miami, FL 33199
Remove			
5) Change	<u>T</u>	Tiffani Tallon	11200 SW 8th St SASC-215
X Add			Miami, FL 33199
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necess	ary). (Be spec	rific)				
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			·			
		•				
						
				 		
					<u>.</u>	
		1		- 		
						
						
		<u>-</u> -				

The date of each amendment date this document was signed	•	, if other than the
Effective date <u>if applicable</u> :		
 	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date we department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/w was/were sufficient for ar	ere adopted by the members and the number of votes east for the amendment(proval.	s)
There are no members or adopted by the board of c	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
Dated	Not 2 00	
Signature	MUALCINX	
have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator - if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
So	nssire Tapanes	
_	(Typed or printed name of person signing)	
Tre	easurer	
 -	(Title of person signing)	