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COVER LETTER

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TO: Amendment Section Division of Corporations

MANASOTA BE		OMMERCE 1	NON PROFIT CORPORATION
N16000001696 DOCUMENT NUMBER:			
The enclosed <i>Articles of Amendment</i> and fee are s			
Please return all correspondence concerning this m	natter to the following:		
TARNISHA CLIATI			
	(Name of Contact Pe	rson)	
MANASOTA BLACK CHAMBER OF COMME		RPORATION	
	(Firm/ Company)	
805 27TH STREET COURT EAST			
	(Address)		
BRADENTON, FL 34208			
	(City/ State and Zip C	Code)	
chattit@gmail.com			
E-mail address: (to be c	ised for future annual rep	ort notification	1)
For further information concerning this matter, ple	ase call:		
TARNISHA CLIATT	21	941	518-2746
(Name of Contact Per	son)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida D	Department of !	State;
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat		Certif Certif	0 Filing Fee icate of Status ied Copy uonal Copy is ised)

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



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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2017

TARNISHA CLIATT 805 27TH STREET COURT EAST BRADENTON, FL 34208

SUBJECT: MANASOTA BLACK CHAMBER OF COMMERCE NON PROFIT

CORPORATION

Ref. Number: N16000001696

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Their were no attached amended articles.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 617A00019333



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Articles of Amendment to Articles of Incorporation of

FILED

MANASOTA BLACK CHAMBER OF COMMERCE NON PROFIT CORPORATION

2017 OCT 18 PM 5: 27

(Name of Corporation V16000001696	as currently filed with the Flo	orida Dept. of State) (1945 ATAT TALLAMAJSKE, FLORI
(Docum	nent Number of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Flor mendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The new
ame must he distinguishahle and contain the word Company" or "Co," may not be used in the name	"corporation" or "incorporate 2	ed" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applica	N/A	
Principal office address <u>MUST BE A STREET A</u>	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX) N/A	
		A
The second secon	tours of the consideration in Florid	a cutur the name of the
 If amending the registered agent and/or registered agent and/or the new register. 		a, enter the name of the
 	N/A	
Name of New Registered Agent:		
		Florida street addressi
New Registered Office Address:	(rionaa (ii veraaaress)
	N/A	Manida.
	(City)	. Florida (Zip Cade)
ew Registered Agent's Signature, if changing F hereby accept the appointment as registered agen	Registered Agent: 1 - Lam familiar with and accep	
_		
	Signature of New Regi	stered 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>V</u> <u>Mi</u>	n <u>n Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove		ILING CANCELLED	
21 Change	R	ETURNED CHECK	w w w v v v v v v v v v v v v v v v v v
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
SEE ATTACHMENT FOR AMENDED ARTICLES				
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RETURNED CHECK				

MANASOTA BLACK CHAMBER OF COMMERCE NON PROFIT CORPORATION DOCUMENT# N16000001696 ATTACHMENT TO ARTICLES OF AMENDMENT

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The corporation is organized exclusively for charitable and educational advancement for the public benefit within the meaning of Internal Revenue Code Section 501c (3). The corporation shall endeavor to empower and sustain Black communities in the Greater Tampa Bay area of Florida.

- Promoting economic growth and development within underserved Black communities in the Greater Tampa Bay area.
- Promoting an understanding of the American Free enterprise system through education, research, and networking.
- Promoting and enhancing leadership, individual involvement, and community development through public forums and training.
- Conducting seminars and networking events designed to educate participants in the management of trade and professional associations and business enterprises.
- Sponsoring educational seminars and conferences to educate youth in entrepreneurship and leadership development.

The	date of each amendment(s)	adoption:	, if other than the
date	this document was signed.		
Effe	etive date <u>if applicable</u> :		
		tho more than 90 days after amendmen	n file date)
<u>Not</u> doc	e: If the date inserted in this bument's effective date on the f	lock does not meet the applicable statutory filin Department of State's records.	g requirements, this date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votoval.	es east for the amendment(s)
	There are no members or medadopted by the board of direct	mbers entitled to vote on the amendment(s). The ctors.	e amendment(s) was/were
	Dated 10	-12-17 15-17 H	FILING CANCELLEI RETURNED CHECK
	Signature	Junge US	
	have not b	airman or vice chairman of the board, president been selected, by an incorporator – if in the hand rt appointed fiduciary by that fiduciary)	
	TARN	ISHA CLIATT	
		(Typed or printed name of per	son signing)
	PRES	IDENT	
	<u></u>	(Title of person sin	minel