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COVER LETTER

TO: Amendment Section. Division of Corporations

NAME OF CORPORATION: Meaclowbrook Old Boys & Girls Association Corp
DOCUMENT NUMBER: N1600002554
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tannesha Miles
(Name of Contact Person)
Meadow brook old Bays & Girls Association Corp
3500 North State Road 7, Suite 440
Lauderdale Lahes, FL 33319
(City/ State and Zip Code)
Mobgafoun dation @ Amail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tannesha Miles = 1950) 908-0006 =
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Status S43.75 Filing Fee & Certificate of Status Certified Copy Certif

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

Meadow brook old Boys	<u> ۹ ه کرد</u>	ASSOC Path		DC	2
(Name of Corporation as curr	ently filed with	the Florida Dept. of Stat	<u>e</u>)	,	
N1600000 2554					
(Document Nu	mber of Corpora	tion (if known)			
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florid</i>	a Not For Profit Corporat	ion adopts the	follow	ing
A. If amending name, enter the new name of the corpor	ation:				
NIA				Th	
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	pration" or "inco	orporated" or the abbrevia	tion "Corp."	_The n or "Inc	ew 2. "
(Principal office address MUST BE A STREET ADDRES	$\frac{3}{3}$				
					—
			وسوا		_
C. Enter new mailing address, if applicable:	NII A			ರಾ	marti.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NIA		T	10 22	1_1
			19.1 g	و پ وس د کند	
D. If amonding the majorand and the district of the state		TI	Ç.º Calles — — — — —	(9	<u> </u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		Florida, enter the name of	or the		
Name of New Registered Agent:	<u> </u>				
New Registered Office Address:	′/A	(Florida street address)			
			orida		
M/A	(City)	1	(Zip Code)		
New Registered Agent's Signature, if changing Registere					
I hereby accept the appointment as registered agent. I am	familiar with an	d accept the obligations of	the position.		
	Signature of Ne	ew Registered Agent, if cha	nging		
	G	G 110 11 11 11 11 11 11 11 11 11 11 11 11	ب ب		

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 S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	EC	Terry-Ann Boothe	
Add Remove			
2) Change Add	5	Simoy Lewin	
	<u> P.</u>	Stephen Dunkley	
RemoveChangeAdd	VP.	Alcardo Jackson	
Remove 5) Change Add	27	Jannesha Miles	
Remove 6) X Change Add	<u>S</u> _	Marga Bennett	
Remove		D 4.64	

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<u> </u>	The state of the s			
				<u> </u>

	date of each amendment(s) ad this document was signed.	option:	, if other than the
Effe	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date,	
		(no more than 90 days after amendment file date,)
	e: If the date inserted in this blocument's effective date on the Dep	k does not meet the applicable statutory filing requirem artment of State's records.	nents, this date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
×	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for .	the amendment(s)
	There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendmers.	ent(s) was/were
	Dated 3	31/2016	
	Signature	31/2016 ernestamiles	
	have not bee	nan or vice chairman of the board, president or other of n selected, by an incorporator – if in the hands of a reco ppointed fiduciary by that fiduciary)	
		annesha Miles	
		(Typed or printed name of person signing	g)
		Treasurer	
		(Title of person signing)	