N 1600000 3196

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COVER LETTER

'TO: Amendment Section Division of Corporations

Harvest Commo	unity Development Center, Inc.
N16000003196 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this n	
Please return all correspondence concerning this in	latter to the following.
Felicia Holland	
	(Name of Contact Person)
Harvest Community Development Center	
	(Firm/ Company)
2039 Normandy Circle	
	(Address)
West Palm Beach, FL 33407	
	(City/ State and Zip Code)
cassandra.fulwood@oasiscdc.org	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Cassandra Fulwood	561 802-0820
(Name of Contact Per	rson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of State	e & =\$43.75 Filing Fee &

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

Harvest Community Development Center, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N16000003196 (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: Oasis Community Development Center, 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. 4845 Foxwood Circle B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) West Palm Beach, FL 33417 C. Enter new mailing address, if applicable: N/A (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: N/A , 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) N/A Change	N/A	N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O. Chara			
6) Change			
Add			
Remove			

(attach	nding or adding additional Ai additional sheets, if necessary).	. (Be specific)			
N/A					
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January 1, 2019	
'he date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
January 1, 2019 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we locument's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	s)
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 JANUARY 1, 2019	
Signature Dollee HOCCO	
(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)	;
Felicia Holland	
(Typed or printed name of person signing)	
President	
(Title of person signing)	