N16000003424

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Jan.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	THE GREATER N	NEW MT. CANAAN INC.	
DOCUMENT NUMBI			
	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
I	HAYES BOLES JR.		
		Name of Contact Person	n
_		Firm/ Company	
. 3	66 W. 18th ST.		
_		Address	
J	ACKSONVILLE, FL. 3220	6	
-		City/ State and Zip Cod	e .
greater	newmtcanaan@email.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
HAYES BOLES		at (904	7295021
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made j	payable to the Florida Depa	artment of State:
■ \$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)
Amen	ng Address dment Section		Address ment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



October 27, 2016

HAYES BOLES JR 36 W 18TH ST JACKSONVILLE, FL 32206

SUBJECT: THE GREATER NEW MT CANAAN INC

Ref. Number: N16000003424

We have received your document for THE GREATER NEW MT CANAAN INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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.

Letter Number: 116A00023161

Carol Mustain Regulatory Specialist II

Articles of Amendment to Articles of Incorporation of

	01			
THE GREATER NEW MT. CANAAN INC.				
(Name of Corporation as curren	tly filed with	the Florida Dept. of State)		
N16000003424				
(Document Numb	er of Corporat	ion (if known)		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida</i>	a Not For Profit Corporation adopt	ts the follo	owing
A. If amending name, enter the new name of the corporate N/A	on:		TL	
name must be distinguishable and contain the word "corporal	ion" or "inco	rporated" or the abbreviation "Co		e new Inc."
"Company" or "Co," may not be used in the name.	N1/4			
B. Enter new principal office address, if applicable:	N/A	<u>.</u>		23
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				සාව සුවු
				<u>دې</u>
	-		10 ×	_ 5 _
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A			PH
			252	2:
			11:11:	∞
D. If amending the registered agent and/or registered office	oo addussa in	Elevide ententhe name of the		
new registered agent and/or the new registered office a	ddress:	riorida, enter the name of the		1
Name of New Registered Agent: N/A				
New Registered Office Address:		(Florida street address)		
the state of the s				
	(City)	, Florida		
	(City)	(Zip Code	<i>2)</i>	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and	d accept the obligations of the posit	tion.	

Page 1 of 4

Signature of New Registered Agent, if changing

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
TO PROVIDE ASSISTANCE TO THE N	EEDY IN THE NEIGHBORH	IOOD.	
•			

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>Mik</u>	n Doe ce Jones cy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	DIR	LONNIE C JONES	36 W. 18TH ST.
Add			JACKSONVILLE, FL. 32206
Remove			
2) X Change	DIR	LARRY D JONES	36 W. 18TH ST.
Add			JACKSONVILLE, FL. 32206
Remove 3) X Change	DIR	HAYES BOLES JR	36 W. 18TH ST.
3) Change			JACKSONVILLE, FL. 32206
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	SEPTEMBER 20, 2016	
The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	-
Note: If the date inserted in this block doe document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date vent of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment	(s)
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated DECEMBER 15,	DALO PAR	
have not been sele	or vice chairman of the board, president or other officer-if director, extend by an incorporator – if in the hands of a receiver, trustee, or sted fiduciary by that fiduciary)	
_20/	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	