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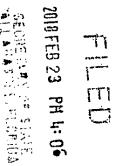
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Amendicus

FEB 23 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

FILIPINO AND STATE OF CORPORATION:	AMERICAN SC	OCIETY OF THE	TREA	ASURE COAST, INC	
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are	submitted for fili	ng.			
Please return all correspondence concerning this	matter to the follo	wing:			
DAISY MCGINNIS					
	(Name of Co	ontact Person)		_	,
FILIPINO AND AMERICAN SOCIETY OF TH	1E TREASURE C	COAST, INC			
	(Firm/ C	Company)	<u> </u>		
1518 SE MINORCA AVENUE					
	(Add	dress)			
PORT SAINT LUCIE, FL 34952					
	(City/ State a	and Zip Code)			
DMCFL@YAHOO.COM					
E-mail address: (to be	used for future ar	nnual report notif	ication)	
For further information concerning this matter, p	lease call:				
DAISY MCGINNIS		772 at		224-1776	
(Name of Contact Po	erson)		(ode)	(Daytime Telephone	Number)
Enclosed is a check for the following amount ma	de payable to the	Florida Departme	ent of S	State:	
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St		Copy al copy is	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing Address Amendment Section		Street Add Amendmer		on	

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



February 13, 2018

DAISY MCGINNIS FILIPINO AND AMERICAN SOCIETY 1518 SE MINORCA AVE PORT SAINT LUCIE, FL 34952

SUBJECT: FILIPINO AND AMERICAN SOCIETY OF THE TREASURE COAST

INC

Ref. Number: N16000006027

We have received your document for FILIPINO AND AMERICAN SOCIETY OF THE TREASURE COAST INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please submit the document in its entirety as the last page is missing.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 718A00003040



Articles of Amendment to Articles of Incorporation of

	•	
, A	articles of Amendment	
A	to rticles of Incorporation	rida Dept. of State)
	of	
TLIPINO AND AMERICAN SOCIETY OF THE TRI	EASURE COAST, INC	7
(Name of Corporation as co	urrently filed with the Flo	rida Dept. of State)
V16000006027		
(Document I	Number of Corporation (if l	known)
rsuant to the provisions of section 617.1006, Florida Stendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
If amending name, enter the new name of the corp	oration:	
A		The new
me must be distinguishable and contain the word "conompany" or "Co." may not be used in the name.	rporation" or "incorporate	
Enter new principal office address, if applicable:	NA	
incipal office address <u>MUST BE A STREET ADDR</u>	ESS) NA	
	NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
	NA	
	NA	
If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered of	nce address:	
Name of New Registered Agent:		
NA -		7
New Registered Office Address:	(F	Floridu street uddress)
NA		, Florida NA
	(City)	(Zip Code)
v Registered Agent's Signature, if changing Regist	tered Agent:	
w Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I describe the appointment as registered agent.		t the obligations of the position.

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 Do Mike Jor Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change	-	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	<u></u>	-		
Add				
Remove				
6) Change				
•				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such
purposes, the making of distributions to organizations that qualify as exempt organizations described under Section
501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning
of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be
distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed
of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the organization
then located, exclusively for such purpose or to such organization or organizations, as said Court shall determine, which
are organized and operated exclusively for such purposes.

	this document was signed. Fobruary 8, 2018-, if other than	th
Effe	ctive date if applicable:	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the iment's effective date on the Department of State's records.	
Ada	ption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
Z	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 <u>February</u> 19, 2018. Signature <u>Unisi Das Luiuis</u>	
	Signature Mari Don Runnis	
	(By the chairman or cice 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)	
	Daisy McGinnis (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	