J. Mobbooth

(Re	questor's Name)	
(Ad	dress)	
	dress)	
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(Cit	y/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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R. WHITE 0CT 0 3 2018



COVER LETTER

TO: Amendment Section Division of Corporations	council (),
NAME OF CORPORATION: Apopka A	Area Concern Citizen Codneil Coalitio
DOCUMENT NUMBER: N/6000006	746
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Joseph A. Washington 3	IW .
Apopka Area Concern C	(Firm/ Company)
P.O. BOX 921	
Apopha, FL. 3.	(Address) 2704 (City/ State and Zip Code)
FL3325@ AOL. CON E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ise call (910) 922 · 5076
Joseph A. Washington (Name of Contact Person	son) at $\frac{910}{\text{(Area Code)}}$ (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
S \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	& 🗆 \$43.75 Filing Fee & — \$52.50 Filing Fee as Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address Amendment 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2018

JOSEPH A WASHINGTON JR. PO BOX 921 APOPKA, FL 32704

SUBJECT: APOPKA AREA CONCERNED CITIZENS COUNCIL, INC.

Ref. Number: N16000006746

We have received your document for APOPKA AREA CONCERNED CITIZENS COUNCIL, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Rebekah White Regulatory Specialist II

Letter Number: 418A00010458

IA S



September 10, 2018

JOSEPH A WASHINGTON JR. PO BOX 921 APOPKA, FL 32704

SUBJECT: APOPKA AREA CONCERNED CITIZENS COUNCIL, INC.

Ref. Number: N16000006746

We have received your document for APOPKA AREA CONCERNED CITIZENS COUNCIL, 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):

You failed to make the correction(s) requested in our previous letter.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Rebekah White Regulatory Specialist II

Letter Number: 218A00018733

Articles of Amendment to Articles of Incorporation

FILED

Apopka Area Concern Citizen Council

(Name of Corporation as currently filed with the Florida Dept. of EGRETARY OF STATE TALLAHASSEE. FL

(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 corpora	tion:	
Apopka Area Concern Ci	lizens Coalition	1 Inc The new
name milst be distinguishable and contain the word "corpor	ation" or "incorporated" or the abbr	eviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	,	1 -
B. Enter new principal office address, if applicable:	2308 Blue Mean	
(Principal office address MUST BE A STREET ADDRESS	Apopka FL. 32	70 <u>3 </u>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		_
D. If amending the registered agent and/or registered of	fice address in Florida, enter the na	me of the
new registered agent and/or the new registered office		
Name of New Registered Agent: Lev	oy Bell	
230	8 Blye Meadow C	T
	(Florida street addr	est)
New Registered Office Address:		
Apo.	ok G	_, Florida <u>32703</u>
- 	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere		. Cali
I hereby accept the appointment as registered agent. Lam f	amiliar with and sceept the obligation	ns of the position.
X	m Del	
/	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	PT V SV	John De Mike Jo Sally Sr	nes		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
1) Change		_		-	
Add				-	
Remove				-	
2) Change		_		_	
Ada				-	
Remove				-	
3) Change		_		_	<u> </u>
Add				_	
Remove				_	
4) Change		_		-	
Add				_	
Remove				-	
5) Change		<u>-</u>		_	
Add				_	<u> </u>
Remove				-	
6) Change					
		_		_	
Add				-	
Remove				_	· · · · · · · · · · · · · · · · · · ·

attach additional she	ng additional Article ets, if necessary). • (f	Be specific)	,				
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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 do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
☐ There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
have not been sel	Doll Record Reco	_
Leroy	Be // (Typed or printed name of person signing)	
Chair	man	
	(Title of person signing)	