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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only

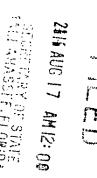


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AUG 2 6 2016

C. CAPROTIERS



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Phi Sie | lma Kappa | kappa | Hexaton | Chapter |
|--|--|-------------------------|---|------------------|
| DOCUMENT NUMBER: NIGOOD | 67504 | | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | | | |
| Please return all correspondence concerning this | matter to the following | | | |
| Do | (Name of Contact | Person) | | |
| Phi S | igma Kappa (Firm/Comp | a Kapp | a Hexat | on Chapter |
| <u> </u> | 1 N Woodla (Address) | nd Blvd | | |
| De | City/ State and Z | 2723 ip Code) | | |
| E-mail address: (to be | h dhurt | ad1ast | etson.e | du |
| For further information concerning this matter, pl | ease call: | | | |
| Daniel Hurtado | | at 407. | - 350 - 6 | 556 |
| (Name of Contact Pe | erson) | (Area Code |) (Daytime T | elephone Number) |
| Enclosed is a check for the following amount ma | de payable to the Floric | la Department o | of State: | |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of Sta | te & \$43.75 Filing F atus Certified Copy (Additional copenclosed) | Cer by is Cer (Ad | a.50 Filing Fee tificate of Status tified Copy ditional Copy is closed) | |
| Mailing Address | | Street Address | • | |

Mailing Address
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

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Florida Dept. of State) 16050007504 (Document Number of Corporation (if known) | lowing |
|--|-------------|
| | lowing |
| | lowing |
| | lowing |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the followed amendment(s) to its Articles of Incorporation: | |
| A. If amending name, enter the new name of the corporation: | ., _ |
| ;; ;; ;; | |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name. | inc." |
| D. Enter now mineral office address if annihable. | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | <u>하는</u> : |
| | <u> 등</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 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: | |
| | |
| (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. | |
| Appendict as registered agent am juminar min and decept the conganions 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>V</u> <u>Mil</u> | n Doe ke Jones ly Smith | |
|----------------------------------|---------------------|-------------------------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) X Change Add Remove | <u>P</u> | Daniel Hurtado | 421 NWOOdland Blvd Deland, FL 32723 |
| 2) Change | P | Daniel McCabe | 421 N woodland Blvd Deland, FL |
| X Remove 3) Change Add | _V | Joe Ross | 32723 421 N woodland Blud Deland, FL |
| Remove 4) Change Add Remove | | | 32723 |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | · | |

| If amending or adding additional Art (attach additional sheets, if necessary). | cles, enter change(s) here (Be specific) | ; | |
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| The date of each amendment(s) adop | otion: | , if other than the |
|--|--|---------------------------|
| date this document was signed. | | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block document's effective date on the Depart | does not meet the applicable statutory filing requirements, this date riment of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were ador was/were sufficient for approval. | oted by the members and the number of votes cast for the amendmen | nt(s) |
| There are no members or member adopted by the board of directors | rs entitled to vote on the amendment(s). The amendment(s) was/wer. | re |
| Dated <u>8</u> 12 | 2016 | |
| Signature Dawn | I & rutado | |
| have not been | an or vice chairman of the board, president or other officer-if directorselected, by an incorporator — if in the hands of a receiver, trustee, of pointed fiduciary by that fiduciary) | |
| | Daniel Hurtado | _ |
| • | (Typed or printed name of person signing) | |
| | Registered Agent, president | · — |
| | (Title of person signing) | |