

NI 000000 7694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

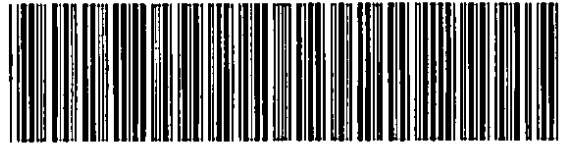
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2022 APR 11 PM 12:26  
CLERK OF THE  
COURT  
TALLAHASSEE, FL

FILED

4/16/2022

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BREVAIRD COUNTY BLUE WIVES INC

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Crystal Behringer

(Name of Contact Person)

(Firm/ Company)

333 Wellwood St SW

(Address)

Palm Bay FL 32908

(City/ State and Zip Code)

bcbwewives@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Crystal Behringer

(Name of Contact Person)

at 321-258-3080

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

already paid

Mailing Address

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

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 APR 11 PM 12:31

SECRETARY OF STATE  
TALLAHASSEE, FL

March 3, 2022

CRYSTAL BEHRINGER  
333 WELLWOOD STREET SW  
PALM BAY, FL 32908

SUBJECT: BREVARD COUNTY BLUE WIVES INC  
Ref. Number: N16000007694

We have received your document for BREVARD COUNTY BLUE WIVES 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 922A00005214

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2022 APR 11 PM 12:26

SECRETARY OF STATE  
TALLAHASSEE, FL

BREVARD COUNTY BLUE WIVES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N16000007694

(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:

N/A

The new

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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

N/A

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                      PT      John Doe

X Remove                    V      Mike Jones

X Add                        SV      Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>Change</u>	<u>V</u>	<u>Cyndi Potenziani</u>	<u>2877 Sebastain Lane</u>
<u>Add</u>			<u>Melbourne, fl 32935</u>
<u>X</u> Remove			
2) <u>Change</u>	<u>T</u>	<u>Deborah Livingston</u>	<u>1373 Mann Ave NW</u>
<u>Add</u>			<u>Palm Bay Florida 32907</u>
<u>X</u> Remove			
3) <u>Change</u>	<u>V</u>	<u>Kimberly Severson</u>	
<u>Add</u>			<u>2609Wilmette Ave</u>
<u>Remove</u>			<u>Titusville, Florida 32780</u>
4) <u>Change</u>	<u>T</u>	<u>Susan Richards</u>	<u>PO Box 110486</u>
<u>X</u> Add			<u>Palm Bay, Florida 32911</u>
<u>Remove</u>			
5) <u>Change</u>	<u>S</u>	<u>Marissa Kennedy</u>	<u>6134 Serene Place</u>
<u>X</u> Add			<u>West Melbourne, Florida 32904</u>
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

**F. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, 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 does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by Brevard County Blue Wives."  
(voting group)

February 14, 2022  
Dated \_\_\_\_\_

Signature Crystal K. Behringer  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Crystal K. Behringer

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)