

Office Use Only



300307336923

01/10/16--01011--027 **65.00

2018 JAH 10 P 1: 45

JAN 1 1 12018. T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	utheast Florida, Inc.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
Lisa Y. Johnson			
	(Name of Contact Pe	rson)	
Girl Scouts of Southeast Florida, Inc.			
	(Firm/ Company	')	
6944 Lake Worth Road			
	(Address)		
Lake Worth, FL 33467			
	(City/ State and Zip C	Code)	
ljohnson@gssef.org			
E-mail address: (to be u	sed for future annual rep	ort notification	1)
For further information concerning this matter, plea	ase call:		
Lisa Y. Johnson	at	561	815-1805
(Name of Contact Pers		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	Department of S	State:
■ \$35 Filing Fee	& □S43.75 Filing Fee of Section of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is esed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clit	eet Address lendment Sectivision of Corpo fton Building of Executive C	orations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Girl Scouts of Southeast Florida, Inc.				
(Name of Corporation	as current	ly filed with the Florida Dept.	of State)	
N16801				
(Docur	ment Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes	, this Florida Not For Profit Co	orporation adopts the f	ollowin
A. If amending name, enter the new name of the	e corporatio	on:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		on" or "incorporated" or the a		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		6944 Lake Worth Road		
		Lake Worth, FL 33467		
				· -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6944 Lake Worth Road		
		Lake Worth, FL 33467		
D. If amending the registered agent and/or registered agent and/or the new registered agent: Name of New Registered Agent:			name of the	
	6944 Lake	Worth Road		
New Registered Office Address:	:	(Florida street d	address)	
	Lake Wort	h	, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			tions of the position.	
_	<u></u> -		201	
	Siş	anature of New Registered Agen	t. if changing	
	P	age I of 4	G	

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>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5. Choraco			
5) Change Add			
Remove			· · · · · · · · · · · · · · · · · · ·
Kemove			
6) Change			
Add			
Remove			

. If amending or adding additional Artical (attach additional sheets, if necessary).	(Be specific)
R/A	
	
<u> </u>	

•	
The date of each amendment(s) adoption: March 16, 2017 late this document was signed.	if other than th
Effective date <u>if applicable</u> : January 2, 2018 (no nigre 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 locument's effective date on the Department of State's records.	be listed as the
Adoption 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.	
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 December 18, 2017 Signature June June 18, 2017	
Signature (By the chairman or vice 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)	
Lisa Y. Johnson	
(Typed or printed name of person signing)	
Chief Executive Officer	

(Title of person signing)