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(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

APR 0 6 2017

T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations Methodise	
NAME OF CORPORATION: Florida Conference United Methodisa Women- Hawthorne Unit, Inc.	
DOCUMENT NUMBER: N17000002459	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Diane Tilbury (Name of Contact Person)	
(Name of Contact Person)	
Florida Conference United Methodise Women-Hawthorne Unit, In	10
(Firm/ Company)	
P.O. Box 127	
(Address)	
Hawthorne FL 32640	
(City/ State and Zip Code)	
d/tilburx@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Diane Tilbury 352-481-2988	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& Certified Copy (Additional copy is enclosed) \$\Bigcup \\$52.50 Filing Fee \& Certified Copy (Additional Copy is Enclosed)	

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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

Florida Conference United	Methodise V	Jomen-Hawthorne Unit,
N17000002459	currently filed with the Fl	orida Dept. of State)
	nt Number of Corporation (if	
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	dist Women-	tawthorne, Inc. The new
name must be distinguishable and contain the word "company" or "Co." may not be used in the name.	,	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	N/A	
D. If amending the registered agent and/or register new registered agent and/or the new registered Name of New Registered Agent:		a, enter the name of the
<u>New Registered Office Address</u> :	N/A (City)	Florida street address), Florida (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:	(— ; ———)
	NIA	SEC MIN
	Signature of New Regi Page 1 of 4	Stered Agent, if changing APR -5 P # 2

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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
l) Change		_ N/A	
Add			
Remove		11/0	
2) Change		N H)	
Add			
Remove		1/0	
3) Change			
Add			
Remove		. 1	
4) Change		NA	
Add			
Remove		. ſ	
5) Change		NIA	
Add			
Remove		ľ	
6) Change		NA	
Add			
Remove		Dogo 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				

	date of each amendment(s) adopti	on:	4/2/17		_, if other than the
	this document was signed.	(no more than 90 do	4 2 17 Tys after amendment file d	ate	
	e: If the date inserted in this block dument's effective date on the Departr	oes not meet the applic	cable statutory filing requi	,	e listed as the
Ado	option of Amendment(s)	(CHECK ONE)			
Ø	The amendment(s) was/were adopte 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 adopted by the board of directors.	entitled to vote on the	amendment(s). The amen	dment(s) was/were	
	Dated <u>4/2/17</u>				
		2 Tilburi			_
	have not been se		board, president or othe ator – if in the hands of a i fiduciary)		
	Dia	ne Tilbu	ry		
		(Typed or p	rinted name of person sign	ning)	
	Trea	ISUrer			
		((Title of person signing)		

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Hawthorne Church Women United, Inc.
DOCUMENT NUMBER: W1700002879
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diane Tilbury (Name of Contact Person)
(Name of Contact Person)
Hawthorne Church Women United, Inc.
(Firm/ Company)
P.O. Box 127
(Address)
Hawthorne FL 32640
(City/ State and Zip Code)
(City/State and Zip Code) ditilbury@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Diane Tilbury at 352-481-2988 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State: No fee necessary Adding EIN.
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional copy is enclosed) S35 Filing Fee S43.75 Filing Fee SCERTIFICATE COPY (Additional Copy is Enclosed)
Mailing Address Street Address

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

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Hawthorne Church We	men Unite	ed, Inc.	
(Name of Corporation	as currently filed with th	e Florida Dept. of State)	
N17000062879	·		<u> </u>
(Docum	ent Number of Corporation	n (if known)	
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida N</i>	<i>Not For Profit Corporation</i> add	opts the following
A. If amending name, enter the new name of the	corporation:		The new
name must be distinguishable and contain the word	"corporation" or "incorp	orated" or the abbreviation "(
"Company" or "Co." may not be used in the name			
B. Enter new principal office address, if applicat	ole: N/A_		
(Principal office address <u>MUST BE A STREET AL</u>	ODRESS)		 -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u> </u>		
D. If amending the registered agent and/or regist new registered agent and/or the new registere		orida, enter the name of the	
new registered agent and/or the new registere	d once address:		
Name of New Registered Agent:	<u> </u>		
New Registered Office Address:	0)/0	(Florida street address)	
_	W/n	, Florida _	
	(City)	(Zip Ca	ode)
New Registered Agent's Signature, if changing Relation I hereby accept the appointment as registered agent.	egistered Agent: . I am familiar with and a	accept the obligations of the	sition.
	N/A	Registered Agent, if changing	2 T
	Page 1 of 4	Registered Agent, ij changing	ED = S-

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 John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	Title Name	<u>Addres</u> s
1) Change	NA	
Add		
Remove	,	
2) Change	NIA	
Add		
Remove	N/A	
3) Change	<u> </u>	
Add		
Remove		
4) Change	NIA	
Add		
Remove		
5) Change	NIA	
Add		
Remove	,	
6) Change	NA	
O) Change	**************************************	
Add Remove		
Kemove		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
ATTEIN	59-2366296			
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<u>, , , , , , , , , , , , , , , , , , , </u>				
	THAT SAME TO S			

date	e date of each amendment(s) adoption: this document was signed. ective date if applicable: (no more than 90 days after amendment file date)	, if other than the
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ument's effective date on the Department of State's records.	t be listed as the
Add	option of Amendment(s) (CHECK ONE)	
亙	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 42117	
	Signature Diane Tilbury	
	(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)	
	Diane Tilbury	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	