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COVER LETTER

TO: Amendment Section Division of Corporations

FL CONF. UN	NITED METHODIST WO	MEN - HAWTI	IORNE, INC.
N17000002459 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	re submitted for filing.		-
Please return all correspondence concerning this	s matter to the following:		
Donna Spear			
	(Name of Contact P	erson)	
Florida Conference United Methodist Women			
	(Firm/ Compan	y)	
5107 N Seminole Ave			
	(Address)	1.	
Tampa, FL 33603			
	(City/ State and Zip	Code)	
donnaspear.umw@gmail.com			
E-mail address: (to b	oc used for future annual re	port notification	1)
For further information concerning this matter,	please call:		
Donna Spear	al	813 t	293-4281
(Name of Contact I	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida	Department of	State:
☐ \$35 Filing Fee		Certifi is Certifi	Filing Fee cate of Status ed Copy tional Copy sed)
Mailing Address Amendment Section		reet Address mendment Secti	on

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

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

Articles of Amendment to Articles of Incorporation

FL CONF. UNITED METHODIST WOMEN - HAWTHORNE, INC.

(Name of Corporation as currently filed with the Florida I	Dept. of State)
N17000002459	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	<u>ion:</u>
FLORIDA CONFERENCE UNITED METHODIST WOMEN	The new
name must be distinguishable and contain the word "corporal "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
(Mailing address MAT BE A FOST OFFICE BOA)	
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office a	<u>iddress:</u>
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
NA	
	(City) , Florida (Zip Code)
	•
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	
· · · · · · · · · · · · · · · · · · ·	v v v v v v v v v v v v v v v v v v v
Si	ignature 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.

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The date of each amendment(s) adoption: NA, 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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

D . 1	April 9, 2020
Dated	
Signatur	e Donna D Spear
	(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)
	Donna D Spear
	(Typed or printed name of person signing)

(Title of person signing)