N11000003001

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
- , (Bu	isiness Entity Nar	ne)		
(Document Number)				
Certified Copies				
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



700296945057

04/03/17--01028--019 **35.00

FILED

2011 APR 13 PR 3: 11

SECRETARY OF STATE

Amend

APR 13 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Fe NAME OF CORPORATION:	mArt Gallery, Inco	rporated		
	0003007			
-		· ·		
The enclosed Articles of Amendme	nt and fee are subm	itted for filing.		
Please return all correspondence co	ncerning this matter	to the following:		
Kimberly Miller				
	(Name of Contact Pe	rson)	
FemArt Gallery, Incorporated				
		(Firm/ Company)	
3044 Haley Lane				
		(Address)		
Jacksonville, FL, 32257				
,	(City/ State and Zip C	Code)	
Femartgallery@gmail.com			· ·	•
E-mail a	ddress: (to be used	for future annual rep	ort notification	2)
For further information concerning	this matter, please c	all:		
Kimberly Miller		at	(904)	625-7183
(Name	of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	g amount made pay	able to the Florida D	epartment of S	State:
	i. 3.75 Filing Fee & I tificate of Status	343.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is sed)
<u>Mailing Address</u> Amendment Secti			eet Address endment Secti	on
Division of Corporations		Division of Corporations		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



April 5, 2017

KAREN ALBER FEMART GALLERY, INCORPORATED 3044 HALEY LANE JACKSONVILLE, FL 32257

SUBJECT: FEMART GALLERY, INCORPORATED

Ref. Number: N17000003007

We have received your document for FEMART GALLERY, INCORPORATED 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Letter Number: 017A00006511

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FemArt Gallery, Incorporated (Name of Corporation as currently filed with the Florida Dept. of State) N17000003007 (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: 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) 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: , Florida _ (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. 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		.	
Remove		·	
5) Change			
Add	-		
Remove			
Kemove			
6) Change	<u> </u>		
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
Add Article IX as follows:
Upon termination or dissolution of FemArt Gallery, Incorporated, any assets lawfully available for distribution shall be
distributed to one (1) or more qualifying organizations described in Section 501(c) (3) of the Internal Revenue Code
of 1986 (or described in any corresponding provision of any successor statute) which organization or organizations have a
charitable purpose which, at least generally, includes a purpose similar to the terminating or dissolving corporation.

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

		3/17/17	
	e date of each amendment(s) adoption:		, if other than the
date	e this document was signed.		
ree.	3/17/17		
ein	fective date <u>if applicable</u> :	o more than 90 days after amendment file date)	
	te: If the date inserted in this block does recument's effective date on the Department	not meet the applicable statutory filing requirements, this date will of State's records.	l not be listed as the
Ada	option of Amendment(s)	CHECK ONE)	
=	The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	
	There are no members or members entit adopted by the board of directors.	eled to vote on the amendment(s). The amendment(s) was/were	
	4/10/17 Dated		
	Signature Ka	in Ole	
	have not been selecte	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	
	Ka	iven Alber	
		(Typed or printed name of person signing)	
	Div	(Title of person signing)	