

N17 000003161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

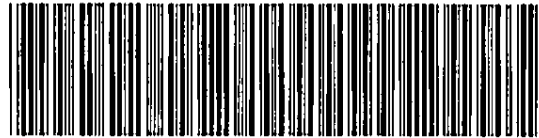
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800347392298

07/07/20--01000--011 **35.00

RECEIVED

JUL 06 2020

2020 JUL 11 11:01

Amend

SEP 15 2020

I ALBRITTON

COVER LETTER

W-9
On
File

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Family Allies, Inc.

DOCUMENT NUMBER: N17000003161

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

Please return all correspondence concerning this matter to the following:

Donald P. Johnson

(Name of Contact Person)

Family Allies, Inc.

(Firm/ Company)

2301 West Eau Gallie Boulevard, STE 104

(Address)

Melbourne, FL 32935

(City/ State and Zip Code)

donald.johnson@brevardfp.org

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

For further information concerning this matter, please call:

Donald P. Johnson

321

752-4650 x 3069

at

(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

80050-001-1704-1701-00001-00



2020 AUG 31 PM 4:50

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2020

DONALD P. JOHNSON
2301 WEST EAU GALLIE BLVD
STE. 104
MELBOURNE, FL 32935

SUBJECT: FAMILY ALLIES, INC.
Ref. Number: N17000003161

We have received your document for FAMILY ALLIES, 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):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 220A00015530

Articles of Amendment
to
Articles of Incorporation
of

Family Allies, Inc.

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

N17000003161

(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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(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:

Donald P. Johnson

2301 West Eau Gallie Boulevard, STE 104

(Florida street address)

New Registered Office Address:

Melbourne

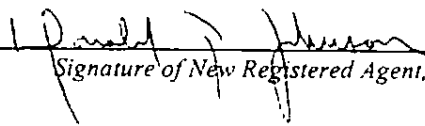
(City)

Florida 32935

(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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	INTERIM EXECUTIVE DIRECTOR	KATIE GUEMPLE * SEE (A) BELOW	2301 WEST EAU GALIE BLVD STE 104 MELBOURNE, FL 32935
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	SE EXECUTIVE IN ADMINISTRATION	JAMES CARLSON	2301 W EAU GALIE BLVD MELBOURNE, FL 32935
3) <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP of OPERATIONS	DR. VALEDIE HILMES	2301 WEST EAU GALIE BLVD STE 104 MELBOURNE, FL 32935
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	BOARD CHAIR	ANDREA BETTING * SEE (B) BELOW	2301 WEST EAU GALIE BLVD STE 104 MELBOURNE, FL 32935
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	BOARD CHAIR	BARR LUTUS * SEE (B) BELOW	2301 West EAU GALIE BLVD STE 104 MELBOURNE, FL 32935

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

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

(A) KATIE GUEMPLE IS LISTED AS INTERIM EXECUTIVE DIRECTOR. THERE IS A CHANGE, KATIE GUEMPLE IS NOW SENIOR DIRECTOR OF OPERATIONS - CHILD WELFARE.

(B) ANDREA BETTING IS LISTED AS BOARD CHAIR BUT HAS LEFT AND NO LONGER
T. M. T. B. BARR LUTUS IS THE TREASURER AND BOARD CHAIR. THERE IS A CHANGE

BETTING IS A REMOVAL.

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: N/A
(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.

- ☐ 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 JUNE 17 2020

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)

DONALD P. JOHNSON
(Typed or printed name of person signing)

CFO
(Title of person signing)