

N 17000007500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

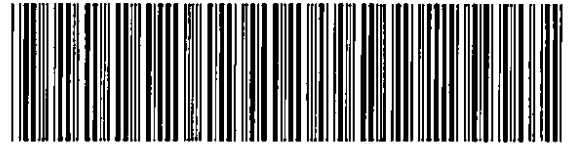
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FILED
2024 AUG -6 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FL Immigration Law & Justice Center (Florida ILJ)

P.O. 1285, Gotha, FL 34734/ Phone: 407-476-6551

Nicole.Leon@Floridailj.org

July 30, 2024

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

VIA USPS Priority: 9405 8301 0935 5119 1001 63

RE: Request to Amend Articles of Incorporation

To Whom it May Concern,

Attached, please find the following documents pursuant to our request to amend our Articles of Incorporation to include a Dissolution Clause and thus also changing our Article numbers, in support of this request, please find:

1. Cover Letter form with check in the amount of \$43.75 detailing the Articles of Incorporation that we are requesting to be amended as well as Articles of Incorporation to add; and
2. Copy of email from Board of Directors showing amendments approved via vote through email as Board of Directors does not meet in July;

Please feel free to call me if you need any further documentation to approve this name change.

Sincerely,

A handwritten signature in cursive script, appearing to read "Nicole León".

Nicole León
Executive Director/Attorney
Florida ILJ
P.O. Box 1285
Gotha, FL 34734
407-476-6551
Nicole.Leon@floridailj.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Immigration Law and Justice Center, Inc.

DOCUMENT NUMBER: N17000007500

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

Please return all correspondence concerning this matter to the following:

Nicole Leon

(Name of Contact Person)

Florida Immigration Law and Justice Center, Inc.

(Firm/ Company)

P.O. Box 1285

(Address)

Gotha, FL 34734

(City/ State and Zip Code)

nicole.leon@floridailj.org

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

For further information concerning this matter, please call:

Nicole Leon

407

476-6551 x 4

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" 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

Articles of Amendment
to
Articles of Incorporation
of

Florida Immigration Law and Justice Center, Inc.

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

N17000007500

(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:

_____ *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:

(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

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TALLAHASSEE, FLORIDA

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

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

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

Change/Amend Article VIII to read:

Upon the dissolution of the organization, after all liabilities are paid, satisfied, or discharged, all assets held by the organization shall be distributed, transferred, conveyed, in trust or otherwise to an organization recognized as exempt under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, to be used exclusively for charitable, educational, or religious purposes.

Add Article IX to read:

The effective date for this corporation shall be: 07/19/2017

As amended by the Board of Directors on 03/19/2018

As amended by the Board of Directors on 01/26/2023

As amended by the Board of Directors on 07/30/2024

The date of each amendment(s) adoption: July 30, 2024 if other than the date this document was signed.

Effective date if applicable: July 30, 2024
(no more than 90 days after amendment file date)

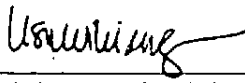
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 July 30, 2024 _____

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 Williams

(Typed or printed name of person signing)

Chairman of the Board

(Title of person signing)

Nicole Leon

From: Lisa Williams <lisa@bbravecoaching.com>
Sent: Tuesday, July 30, 2024 11:02 AM
To: DS-South East; Molly McEntire; Audrey Warren; Pamela Qualls; Ashley Hamill; Nicole Leon; Linda
Subject: Articles of Incorporation Dissolution Clause

Good morning Board,

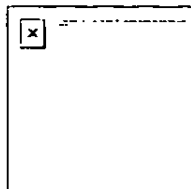
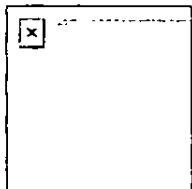
The addition of the dissolution clause to the Articles of Incorporation was approved by a majority vote.

Nicole will proceed with updating our records with the state and respond to the IRS.

Thanks for your prompt attention to this matter.

Lisa

Lisa Williams PCC, SPHR, SHRM-SCP



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Immigration Law and Justice Center, Inc.

DOCUMENT NUMBER: N17000007500

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(Firm/ Company)

P.O. Box 1285

(Address)

Gotha, FL 34734

(City/ State and Zip Code)

nicole.leon@floridailj.org

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For further information concerning this matter, please call:

Nicole Leon

407

476-6551 x 4

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

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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