

X170000008203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

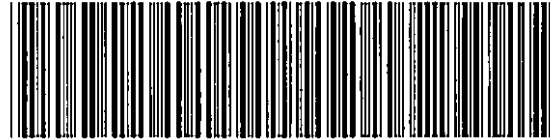
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

05/27/21--01010--026 **35.00

2021 AUG 11 AM 8:46
CLERK OF STATE
JULIE A. STONE

FILED

AUG 12 2021
A RAMSEY

00167
X 00789, 01169, 00707, 00671

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Phi Delta Theta Florida Epsilon Chapter Inc.

DOCUMENT NUMBER: N17000008203

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

Please return all correspondence concerning this matter to the following:

Caleb Fallin

(Name of Contact Person)

Phi Delta Theta Florida Epsilon Chapter Inc.

(Firm/ Company)

13717 N 42nd Apt. 7 Tampa, FL 33613

(Address)

Tampa, FL 33613

(City/ State and Zip Code)

us f phi delt treasury@gmail.com

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

For further information concerning this matter, please call:

Caleb Fallin

(Name of Contact Person)

at (727) - 455-4449

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 AUG 11 PM 1:29

July 27, 2021

CALEB MICHAEL FALLIN
PHI DELTA THETA
13717 N. 42ND ST., APT 7
TAMPA, FL 33613 US

SUBJECT: PHI DELTA THETA FLORIDA EPSILON CHAPTER INC.
Ref. Number: N17000008203

We have received your document for PHI DELTA THETA FLORIDA EPSILON CHAPTER 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

You failed to make the correction(s) requested in our previous letter.

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) 245-6823.

Annette Ramsey
OPS

Letter Number: 221A00017468

Articles of Amendment
to
Articles of Incorporation
of

Phi. Delta Theta Florida Epsilon Chapter Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N17000008203

(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:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Caleb Fallin

13717 N 42nd St. Apt. 7

(Florida street address)

New Registered Office Address:

Tampa

(City)

Florida 33613

(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.

Caleb Fallin

Signature of New Registered Agent, if changing

2021 AUG 11 AM 8:46
STATE OF FLORIDA
DEPT. OF STATE

FILED

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

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Cristiano Masiol</u>	<u>13717 N 42nd St.</u> <u>Apt. 6</u> <u>Tampa, FL 33613</u>
2) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Samuel Williams</u>	<u>13717 N 42nd St. Apt. 7</u> <u>Tampa, FL 33613</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Caleb Fallin</u>	<u>13717 N 42nd St.</u> <u>Apt. 8</u> <u>Tampa, FL 33613</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Andres Ort. 2</u>	<u>13717 N 42nd St.</u> <u>Apt. 5</u> <u>Tampa, FL 33613</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Christopher Jen</u>	<u>13717 N 42nd St.</u> <u>Tampa, FL 33613</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Kristian Del</u>	<u>13717 N 42nd St.</u> <u>Tampa, FL 33613</u>

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

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

Remove: Christopher Korzen, T, 13717 N 42nd St. Tampa, FL 33613

Remove: Adam Sargeldin, Chapter Advisor, 13717 N 42nd St. Tampa, FL 33613

Remove: Ank. t Kumar, Registered Agent, 13717 N 42nd St. Tampa, FL 33613

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings visible.

- ☐ 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 08/05/2021

Signature Caleb Fallin

(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)

Caleb Fallin
(Typed or printed name of person signing)

Treasurer
(Title of person signing)