N1700009058

	ļ	
(Re	questor's Name)	
	İ	
(Ad	dress)	_
	j	
(Ad	dress)	
(,	
- 2227		
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
		•
	isiness Entity Na	me)
\	,	,
(D.		· · · · · · · · · · · · · · · · · · ·
(Do	ocument Number	1
		1
Certified Copies	_ Certificate	s of Status
		ı
Special Instructions to	Filing Officer	;
Opecial instructions to	r ming officer.	`
		<u> </u>

Office Use Only



000306092670

12/01/17--01028--007 **35.00

2017 DEC - 1 PH 4: 11

C. GOLDEN

DEC - 4 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

ommunities In Schools Inc. of Putnan The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person) (Firm/ Company) (Address) (to be used for future annual report notification) For further information concerning this matter, please call: at 386 - 328-2442 or 386-336-6461 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

MI DEC THE DECEMBER OF THE STATE OF THE STAT Articles of Amendment Articles of Incorporation (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 ASTREET 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: New Registered Office Address:

Signature of New Registered Agent, if changing

Florida

(Zip Code)

(City)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,

New Registered Agent's Signature, if changing Registered Agent:

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	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change Add Remove		
2) Change Add		
Remove 3) Change Add Remove		
4) Change Add Remove		
5) Change Add Remove		
6) Change Add	<u>-</u>	
Remove /		

Ē.	If amending or adding	additional A	Articles,	enter	change(s)	here:
	(attach additional sheets	. if necessary	·). (Be	specif	îc)	

The date of each amendment(s) adoption: Newber 14, 2017 date this document was signed.	, if other than the
Effective date if applicable: NOVEWDEN 14 2017 (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 document's effective date on the Department of State's records.	: listed as the
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 November 27, 2017	
Signature Advice (By the chairman or vice chairman of the polard, 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)	
Patricia C Sweffield (Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	