N17000009075

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SECRETARY OF STATE
TALLAHASSEF FI

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Alachua County La	bor Coalition, Inc.		
	N17000009075			
DOCUMENT NUMBER:				
The enclosed Articles of Ar	nendment and fee are sub	omitted for filing.		
Please return all correspond	lence concerning this mat	ter to the following:		
LAURENCE C HOOD				
		(Name of Contact Pers	on)	
	-	(Firm/ Company)		
629 NE BOULEVARD				
	· · · · · · ·	(Address)		
GAINESVILLE, FL 32601				
	<u>, </u>	(City/ State and Zip Co	de)	
chadhood@earthlink.net				
	E-mail address: (to be use	d for future annual repor	t notification	1)
For further information con	cerning this matter, please	e call:		
LAURENCE C HOOD		at	52	262-6771
1	(Name of Contact Person		\rea Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida De	partment of	State:
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee cate of Status and Copy cional Copy is used)
Mailian	t ddworn	S4	متحدادات ف	

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

FILED

Articles of Amendment to Articles of Incorporation

2022 MAR 31 AH 6: 54

SECRETARY OF STATE TALLAHASSEE, FL

Alachua County Labor Coalition, Inc.

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N17000009075		
(Document Numb	er of Corporation (if known))
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pro	fit Corporation adopts the following
A. If amending name, enter the new name of the corporat	<u>iọn:</u>	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or i	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box	358201
	Gzinesvilla	e FL
		32635
D. If amending the registered agent and/or registered office	ce address in Florida, enter	the name of the
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida s	treet address)
		Elosido
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Augusta	
I hereby accept the appointment as registered agent. I am fai		bligations 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.

V Mike Jo	<u>ones</u>	
<u>Title</u>	Name	<u>Addres</u> s
D	TATTERSALL, JEREMIAH	230 NW 14TH AVE GAINESVILLE, FL 32601
<u>T</u>	ROMERO, ADOLFHO	25 SW 5TH TERR APT, 4244 GAINESVILLE, FL 32601
	· · · · · · · · · · · · · · · · · · ·	
	Title D T	Title Name D TATTERSALL, JEREMIAH

		
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-		
		
		
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo- document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s)	

Dated	22 MARCH 2022
Signati	(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)
	LAURENCE C HOOD
	(Typed or printed name of person signing)

(Title of person signing)