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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Linena.

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 15, 2019

JHODY POLK LEADING RETURNING CITIZENS P. O. BOX 568524 ORLANDO, FL 32856

SECRETARY OF A LATE SUBJECT: FLORIDA COUNCIL FOR INCARCERATED AND FORMERLY INCARCERATED WOMEN AND GIRLS, CORPORATION

Ref. Number: N17000012528

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The registered agent must sign accepting the designation.

PAGE 2 OF 4 IN SECTION #6, IS JHODY POLK IS BEING CHANGED, ADDED OR REMOVED AS SECRETARY???????

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) **2**45**6**950.

Darlene Connell

Regulatory Specialist II Supervisor Letter Number: 919A00001182

COVER LETTER

TO: Amendment Section Division of Corporations

Florida Council for NAME OF CORPORATION:	r Incarcerated and Former	y Incarcerat	ted Woman and Gi	rls, Corporation
N17000012528 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	ibmitted for filing.			
Please return all correspondence concerning this ma	itter to the following:			
Susanne Manning. President				
	(Name of Contact Perso	n)		
Leading Returning Citizens, Inc.				
	(Firm/ Company)			
4212 Kildaire Avenue, Suite 1				
	(Address)			
Orlando, FL 32812				
	(City/ State and Zip Coo	ie)		
Susanne.lrc@gmail.com				
E-mail address: (to be us	ed for future annual report	notification	n)	
For further information concerning this matter, please	se call:			
Susanne Manning, President	4(at)7	321-5835	
(Name of Contact Person		rea Code)	(Daytime Teleph	one Number)
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of S	State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)	

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Florida Council for Incarcerated and Formerly Inc	arcerated V	Vomen and Girls, Corporate	on
(Name of Corporation	as curren	tly filed with the Florida	Dept. of State)
N17000012528			
(Docur	nent Numb	er of Corporation (if knowr	n)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For Pro	ofit Corporation adopts the following
A. If amending name, enter the new name of the	e corporati	on:	
Leading Returning Citizens, Inc			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" or 4212 Kildaire Avenue, Su	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
			SECR.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O, Box 568524	N29
		Orlando, FL 32856	SEE 9
			PA S
D. If amending the registered agent and/or regi- new registered agent and/or the new register			r the name of the
Name of New Registered Agent:	Susanne Manning		
	4212 Kild	aire Avenue, Suite 1	
New Registered Office Address:		(Florida	street address)
	Orlando		, Florida 32812
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I	Registered	Agent:	
I hereby accept the appointment as registered agen			obligations of the position.
	O	_1	•
	· ``.	20440 (1)	6

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: X Change X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jhody Polk	1624 NW 5th Avenue
Add X Remove			Gainesville, FL 32603
2) Change	<u>v</u>	Rebecca Johnson	2624 NW 5th Avenue
Add X Remove			Gainesville, FL 32603
3) Change	P	Susanne Manning	4212 Kildaire Avenue
X Add			Orlando, FL 32812
Remove			
4) Change	VP	LaShanna Tyson	824 Camargo Way, Apt 204
X Add			Altamonte Springs, FL 32714
Remove			<u></u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)		
			
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	e date of each amendment(s) adoption:	, if other than the
1210	this document was signed.	
Effe	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ument's effective date on the Department of State's records.	be listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 January 24, 2019	
	Signature Jusane Marine	_
	(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)	
	Susanne Manning	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	