M17/45

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Voices For Children of the Suwannee Valley Corp.			
DOCUMENT NUM	BER: <u>N17145</u>		
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
	Line	da Dedge	
- 12	(Name of	Contact Person)	
	Voices For Children of	the Suwannee Valley Corp) .
	(Firm	/ Company)	
	213 Howa	ard Street East	
	(A	Address)	
	Live Oa	ik, FL 32064	
	(City/ Stat	e and Zip Code)	
For forther in formation		d for future annual report notifica	ution)
ror further informatio	n concerning this matter, please	e can:	
Linda Dedge		at (386)364-772	
(Name	of Contact Person)	(Area Code & Daytir	ne Telephone Number)
Enclosed is a check for	r the following amount made pa	ayable to the Florida Department	of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address dment Section	Street Address Amendment Section	,
Dívisio	on of Corporations	Division of Corporatio	ns
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Center	Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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

(Name of Corporation as currently med with the	e Florida Dept. of State)
N17145	
(Document Number of Corporatio	n (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, the following amendment(s) to its Articles of Incorporation:	his <i>Florida Not For Profit Corporation</i> adopts
A. If amending name, enter the new name of the corporation:	;
The new name must be distinguishable and contain the word "abbreviation "Corp." or "Inc." "Company" or "Co." may not b	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	THE STATE OF THE S
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
Name of New Registered Agent:	
New Registered Office Address: (Florida	a street address)
	(City), Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am fa position.	
Cinnatura of Nov. D	agistared 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres/D	Rosie M. Decker	1022 Weller Are	□_Add
/		1022 Weller Are Live DAKA 32064	Remove
VP/S	Gail Mickel	15740 191 th Ten	
,		O'B(12N, PG JZD71	Remove
Trace.	Kyna Smith	2892 135th Rd LIUC DAK, R32060	Add
		LIVE DAK, R32060	Remove
` (attach addit	g or adding additional Articles, enter continuous sheets, if necessary). (Be specified list of corporate officers.		
	·		
· · · · · · · · · · · · · · · · · · ·	- 44-24		
	<u> </u>		
			

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)

Sec. Pob Crankshaw 1057 ck 13L	<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	<u> Sec</u> .	Rob Crankshaw	11057 CK	13 L _ Add
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			DOWLINS PWL	Remove
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			• •	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				☐ Remove
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	Dopa	Woods Bours	0.3 1	1918
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	14	VICINAL DIVILE	AIJ MIX	Add Remove
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			Live Oak, R	32064
(attach additional sheets, if necessary). (Be specific)	E. <u>If amend</u>	ling or adding additional Articles, enter	change(s) here:	
See attached list of corporate officers.	(attach ad	dditional sheets, if necessary). (Be specif	ic)	
	See attact	ned list of corporate officers.		
			·	
				

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)

<u>Title</u>	Name	Address	Type of Action
VP_	Gregg Scott	213 HOWARD E	Add Remove
Sen	Deborah Hall	Live Dak, R 3204	
<u>uc</u>		۱، کې	_ X Add _ ☐ Remove
Treas	P.K. Vonhall		_ 🔀 Add
			Remove
E. If amend	ing or adding additional Articles, enter	r change(s) here:	
(anach aa	ditional sheets, if necessary). (Be spec	ijic)	
			
	-		
·····	\		
			

The date of each amendme	$ant(s)$ adoption: $\Omega D R 1 21, 2011$	
(date of adoption is required)		
Effective date <u>if applicable</u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	0.27-2011	
h	By the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing) Crasident (Title of person signing)	

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