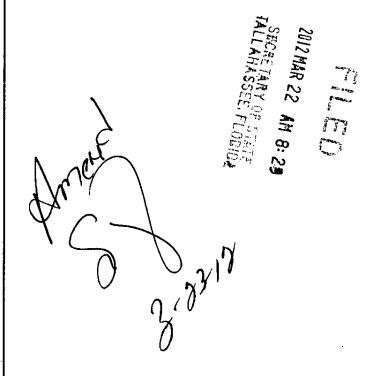
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## COVER LETTER

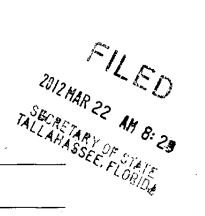
TO: Amendment Section Division of Corporations Voices for Children of the Suwannee Valley Corp The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Linda Dedge (Name of Contact Person) Voices for Children of the Suwannee Valley Corp (Firm/ Company) 213 Howard Street East (Address) Live Oak, Florida 32064 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Linda Dedge 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 (Additional Copy is enclosed) Enclosed) **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



## Voices for Children of the Suwannee Valley Inc

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

N17145

(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:

name must be distinguishable and contain th	ne word "corporation" or "inco	The properties of the abbreviation "Corp." or '
"Company" or "Co." may not be used in th	e name.	
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
C. Enter new mailing address, if applical		
(Mailing address MAY BE A POST OF		
D. If amending the registered agent and/o	r registered office address in	Florida, enter the name of the
D. If amending the registered agent and/o new registered agent and/or the new re		Florida, enter the name of the
		Florida, enter the name of the
new registered agent and/or the new re		
new registered agent and/or the new registered Agent:	egistered office address:	
new registered agent and/or the new registered Agent:	egistered office address:	idress)
new registered agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  New Registered Agent's Signature, if chan	egistered office address:  (Florida street ad  (City)  uging Registered Agent:	dress), Florida (Zip Code)
Name of New Registered Agent:	egistered office address:  (Florida street ad  (City)  uging Registered Agent:	dress), Florida (Zip Code)

Page 1 of 4

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	<u>PT</u>	John Doe						
X Remove	<u>v</u>	Mike Jones						
_X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s					
1) Change Add Remove	<u>s</u>	Deborah Hall	1064 SW Siloam Street Lake City, FLorida 32024					
2) Change Add Remove	S	Eva Wainwright	196 SE Stanford Place Lake City, Florida 32025					
3) Change Add Remove								
4) Change Add Remove								
5) Change Add Remove								
6) Change Add Remove	<del></del>							

E.	If amending of (attach addition	r adding addition al sheets, if neces	al Articles, sary). (Be	enter chan specific)	ige(s) here:				
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The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
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  Signature
(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)
Wanda Bruce
(Typed or printed name of person signing)
President
(Title of person signing)