1118000003036

(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:
3. HORNE 2023
3., 11

Office Use Only



100407797111

05/01/28--01044--012 **43.75



COVER LETTER

TO: Amendment Section Division of Corporations

Gar NAME OF CORPORATION:	nma Beta Chi Nat	ional Service Fraterni	ty. Inc.	
N180000 DOCUMENT NUMBER:				
The enclosed Articles of Amendmen	and fee are subn	nitted for filing.		
Please return all correspondence con	cerning this matte	r to the following:		
Delvis Rogers				
		(Name of Contact Per	son)	
Gamma Beta Chi Fraternity, Inc.				
	10-	(Firm/ Company)		
P.O. Box 1676				
		(Address)		
Hallandale Beach, Florida 33008				
		(City/ State and Zip C	ode)	
gbxalphachapter@gmail.com				
E-mail ad	dress: (to be used	for future annual repo	ort notification	1)
For further information concerning t	his matter, please	call:		
Delvis Rogers			404	834-6103
(Name o	of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	g amount made pa	yable to the Florida D	epartment of	State:
	75 Filing Fee & lificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee leate of Status led Copy tional Copy is used)
Mailing Address Amendment Section	nn		et Address endment Secti	ion
Division of Corpor			ision of Corpo	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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

	Articles of Amendment	· ·
	to Articles of Incorporation of	THE PARTY OF THE P
Gamma Beta Chi National Service Fraternity. Inc	· Alpha Chapter	
(Name of Corporation as currently filed with the	Florida Dept. of State)	The Contract of the Contract o
N18000003036		
(Docume	ent Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006. Flori amendment(s) to its Articles of Incorporation:	ida Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
Gamma Beta Chi Fraternity, Inc Alpha Chi Chapte	ег	The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
D. If amending the registered agent and/or regist	tered office address in Florida, e	nter the name of the
new registered agent and/or the new registere		
Name of New Registered Agent:		
New Registered Office Address:	(Flor	ida street address)
-	(City)	, Florida (Zip Code)
	•	· •
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.		e obligations of the position.
_	Signature of New Register	ed 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 Do V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add			
x Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
	·-···		
			·

		
		
		
		
		
		
	<u> </u>	
		
The date of each amendment(s) adoption:date this document was signed.		, if other than the
Effective date if applicable:		
(no more	than 90 days after amendment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State	et the applicable statutory filing requirements, this date will not te's records.	be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
The amendment(s) was/were adopted by the m was/were sufficient for approval.	nembers and the number of votes cast for the amendment(s)	

No. 2022
August 05, 2022
Dehns D. Roen
(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)
Delvis D. Bouers
Delvis D. Rogers
(Typed or printed name of person signing)
Treasurer

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were