

N180000003365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

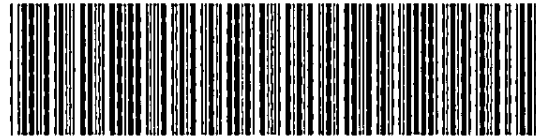
(Business Entity Name)

(Document Number)

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19 FEB 19 AM 9:16  
TALLAHASSEE, FLORIDA

FEB 20 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 4, 2019

RIVA HEINRICH  
903 LAKE LILY DRIVE A239  
MAITLAND, FL 32751

SUBJECT: URBAN KNIGHTS PLANNING ASSOCIATION INC  
Ref. Number: N18000003365

We have received your document for URBAN KNIGHTS PLANNING ASSOCIATION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 219A00000264

RECEIVED  
2019 FEB 19 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

[www.sunbiz.org](http://www.sunbiz.org)

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Urban knights Planning Association Inc.

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Riva Heinrich  
(Name of Contact Person)

urbanknights planning Association Inc.  
(Firm/ Company)

903 Lake Lily Dr. A239  
(Address)

Maitland, FL 32751  
(City/ State and Zip Code)

riva@knights.ucf.edu  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at \_\_\_\_\_  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

URBAN KNIGHTS PLANNING ASSOCIATION INC

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

N18000003365

(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:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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 ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

☒ D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

OWEN BETSCH

SUITE 700 618 E. SOUTH STREET

(Florida street address)

New Registered Office Address:

ORLANDO

(City)

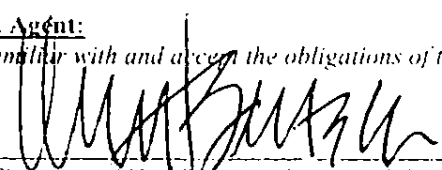
Florida

32801

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.

Example:

|                 |           |                    |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u>    |
| <u>X</u> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <u>X</u> Add    | <u>SV</u> | <u>Sally Smith</u> |

Type of Action  
(Check One)

Title

Name

Address

1) X Change P IRINA PASHININA 7501 Citrus ave II 18  
\_\_\_\_\_ Add Goldenrod, FL 32793  
\_\_\_\_\_ Remove

2) X Change S Heather Croney 475 Dream Lake Dr  
\_\_\_\_\_ Add Apopka, FL 32712  
\_\_\_\_\_ Remove

3) X Change VP Joan Lugo 2217 Heinrich  
\_\_\_\_\_ Add Line Orlando, FL  
\_\_\_\_\_ Remove 32826

4) X Change T Riva Heinrich 903 Lake Lily  
\_\_\_\_\_ Add Dr. A239  
\_\_\_\_\_ Remove Maitland, FL 32751

5) \_\_\_\_\_ Change \_\_\_\_\_ \_\_\_\_\_  
\_\_\_\_\_ Add \_\_\_\_\_  
\_\_\_\_\_ Remove \_\_\_\_\_

6) \_\_\_\_\_ Change \_\_\_\_\_ \_\_\_\_\_  
\_\_\_\_\_ Add \_\_\_\_\_  
\_\_\_\_\_ Remove \_\_\_\_\_

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

• The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

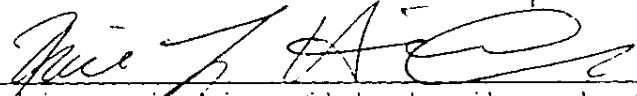
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 02/08/19

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)

Riva Heinrich  
(Typed or printed name of person signing)

Treasurer  
(Title of person signing)