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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Urban Knights Planni NAME OF CORPORATION:	ng Association Inc		
N18000003365 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
Kyle Ruperto			
(	Name of Contact Perso	n)	
Urban Knights Planning Association Inc			
	(Firm/ Company)		
702 S Deerwood Ave			
	(Address)		
Orlando, FL 32825			
(ell)	City/ State and Zip Coo	le)	
E-mail address: (to be used	for future annual report	ov notification	)
For further information concerning this matter, please of	all:		
Kyle Ruperto	30 at	)5	283-4349
(Name of Contact Person)	<del></del>	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Dep	eartment of S	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amen Divisi The C	Address dment Section of Corpo Centre of Ta N. Monroe	rations

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Urban Knights Planning Association Inc

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N18000003365		1
(Document N	umber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered off	ice address:	
Name of New Registered Agent:		
	(Flo	rida street address)
New Registered Office Address:		,
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent: m familiar with and accept t	he obligations of the position.
	Signature of New Registe	red Avent if chanving

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 D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change Add Remove	<u>P</u>	Jady Chen	702 S Deerwood Ave Orlando, FL 32825
2) X Change Add	VP	Lindsey Craig	702 S Deerwood Ave Orlando, FL 32825
Remove 3 ) X Change Add Remove	<u>S</u>	Ulrica Diamond	702 S Deerwood Ave Orlando, FL 32825
4) X Change Add	<u>T</u>	Kyle Ruperto	702 S Deerwood Ave Orlando, FL 32825
Remove  5)	APA Student Re <del>presentati</del> ve	Derrick Galang	702 S Deerwood Ave Orlando, FL 32825
Remove 6) Change Add			
	lding additional Art heets, if necessary).	icles, enter change(s) here: (Be specific)	

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	*****
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
<u> </u>	o more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not be listed as the t of State's records.
Adoption of Amendment(s) (	CHECK ONE)
The amendment(s) was/were adopted b was/were sufficient for approval.	y the members and the number of votes east for the amendment(s)

	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Dated	September 16, 2020
Signatur	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)
	Kyle Rueprto
	(Typed or printed name of person signing)
	Treasurer
	rreasurer

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