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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	MARCH FOR OUR I	LIVES PARKLAND), INC.	
1	N18000003518			
DOCUMENT NUMBER: _				
The enclosed Articles of Amo	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
Nayla Yared				
	(Name of Contact Pe	rson)	
	`	(Firm/ Company)	
11824 NW 69th Place				
		(Address)		
Parkland, FL. 33076				
	(City/ State and Zip C	Code)	· ·
naylayared@gmail.com				
E-	mail address: (to be used	for future annual rep	ort notification)
For further information conce	eming this matter, please o	all:		
Nayla Yared		at	612	8018711
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida D	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & E Certificate of Status	S43.75 Filing Fee a Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)
Mailing A	ddress	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARCH FOR OUR LIVES PARKLAND, INC.

(Name of Corporation as curren	ntly filed with the Florida	a Dept. of State)
N18000003518		
(Document Numb	ber of Corporation (if know	vn)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For F</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	tion:	
Not Applicable		The new
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	ution" or "incorporated"	
B. Enter new principal office address, if applicable:	Not Applicable	
Principal office address MUST BE A STREET ADDRESS)	= 10 to 10 t
		SA TI
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable	24 P
		ELONE OC
D. <u>If amending</u> the registered agent and/or registered offi	ce address in Florida, en	ter the name of the
new registered agent and/or the new registered office a		
Not Appl Name of New Registered Agent:	licable	
New Registered Office Address:	(Florid	da street address)
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	l Agent:	
hereby accept the appointment as registered agent. I am fa		e obligations of the position.
S	Signature of New Registere	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	<u>V</u> <u>Mik</u>	<u>i Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	SCOTT BROOK	3839 NW BOCA RATON BLVD.,
			STE, 100
Add Remove			BOCA RATON, FL 33431
2) Change	V	CINDY KAUFMAN	3839 NW BOCA RATON BLVD.,
X Add	- 		STE, 100
Remove			BOCA RATON, FL 33431
3) Change		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Add			
Remove			
4) Change			
Add			
Remove			
51 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)	
Not Applicable	
<u></u>	
·	

U9/10/	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more	than 90 days after amendment file date)
Note: If the date inserted in this block does not med document's effective date on the Department of States	et the applicable statutory filing requirements, this date will not be listed as the e's records.
Adoption of Amendment(s) (CHEC	K <u>ONE</u>)
■ The amendment(s) was/were adopted by the m was/were sufficient for approval.	embers and the number of votes cast for the amendment(s)
☐ There are no members or members entitled to adopted by the board of directors.	vote on the amendment(s). The amendment(s) was/were
09/20/2018 Dated	
Signature 41	
(By the chairman or vice cha have not been selected, by other court appointed fiduc	airman of the board, president or other officer-if directors on incorporator – if in the hands of a receiver, trustee, or output iary by that fiduciary)
Nayla Yared	
	Typed or printed name of person signing)
President	
	(Title of person signing)