N18000003943

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TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

BREVARD COLLABORATIVE ASSOCIATION, INC. NAME OF CORPORATION: _ N18000003943 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VALERIE WEAVER (Name of Contact Person) (Firm/ Company) 5430 VILLAGE DRIVE, STE. 102 (Address) VIERA, FL 32955 (City/ State and Zip Code) vweaver@lorislaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 637-0067 Valerie Weaver (Davtime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED

2021 OCT -4 AM 6: 52

BREVARD COLLABORATIVE ASSOCIATION, INC. SECRETARY OF STATE TALLAHASSEE, FULL (Name of Corporation as currently filed with the Florida Dept. of State) N18000003943 (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: 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: _ (Florida street address) New Registered Office Address: _ Florida _ (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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add	-	_		
Remove			-	
2) Change Add		_		
Remove 3) Remove Add Remove		_		
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		~		
Remove				
E. If amending or additional sheet			icles, enter change(s) here: (Be specific)	
Amend the Articles of In	corporati	ion by sub	ostituting the below language in Article III	
Article III PURPOSE: T	his organ	ization is	organized exclusively for charitable, religious	, educational, and scientific
			making of distributions to organizations that q	
	_		iternal Revenue Code, or corresponding section	
			d to operate for educational purposes including	

ne benefit and use of collaborative fa	mily law dispute resolution, and (2) planning and implementing educa	tional
pportunities for collaborative law pr	ofessionals and other interested parties.	
		
		
		
		
ne date of each amendment(s) add to this document was signed.	option:	, if other than the
fective date if applicable: 09-30	(no more than 90 days after amendment file date)	
		
ote: If the date inserted in this bloc cument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date vartment of State's records.	vill not be listed as the
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east for the amendment.	(s)

	09-30-21
Dated	
Signatu	re to the de
C	(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)
	Valerie Weaver
	(Typed or printed name of person signing)
	Director (Title of person signing)