1180000007322

(Re	equestor's Name)		
(Ad	ddress)		
(Ac	ddress)		
(C	ity/State/Zip/Phone #)	
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SECRUTARY OF STATE TALLAHAUSSEE, FLORIDA

AUG 1 0 2018 T. LEWIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: <u>COALCTION</u>	OF CONCERN	ED CIT	TIZENS 4 CHANGE	INC
DOCUMENT NUMBER: W1800	000732	3		
The enclosed Articles of Amendment and fee are subm	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
JORDAN B. HILLARD	(SECRE)	(ARY)		
(Name of Contact Person	n)		
	(Firm/ Company)			
59 BAY AVE				
,	(Address)			
DEFUNIAK SPRINGS	, FL 324	35		
		c)		
JBH37 @ PANHANDLE.	for future annual report	notification)		
For further information concerning this matter, please c Judan B. Hillard (Name of Contact Person) Enclosed is a check for the following amount made pay	21	850	725-0512	
(Name of Contact Person)	at	rea Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made pay	able to the Florida Depa	artment of S	tate;	
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status		Certific Certific	Filing Fee cate of Status ed Copy onal Copy is eed)	
Mailing Address Amendment Section	Amen	<u>Address</u> Iment Sectio		
Division of Corporations P.O. Box 6327		on of Corpor Building	rations	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Concerne	O CITIZENS	429HANG-E	PHBU
(Name of Corporation as curre	ntly filed with the Flori	da Dept. of State)	
N 18000007323		SECRETARY TALLAHASSER	DE STATE CELORIDA
	ber of Corporation (if kn		
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	ees, this <i>Florida Not For</i>	Profit Corporation :	adopts the following
A. If amending name, enter the new name of the corpora	tion:		
C4WARD, INC.			The new
CHWARD, INC. name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ttion" or "incorporated	or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable:	NJA		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		.	
C. Enter new mailing address, if applicable: (Muiling address <u>MAY BE A POST OFFICE BOX</u>)	N/A		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		enter the name of th	<u>e</u>
Name of New Registered Agent: N/A	<u> </u>		
	<i>tFlo</i>	rida street address)	
New Registered Office Address:			
/^	\	, Florid	a
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registered liberaby accept the appointment as registered agent. I am fo	I Agent: amiliar with and accept t	he obligations of the	position.
~ //	3		
	4 Signature of New Registe	red Agent, if changir	ng

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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	N/A ALL - NOCHANGE	
Add		
Remove		
2) Change		
Add		
Remove		494.0
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
Actiose		
6) Change		12-12-21
Add		
Remove		

E. If amending or adding additional A	rticles, enter change(s)	here:		
E. If amending or adding additional A (attach additional sheets, if necessary.). (Be specific)			
/ 1				
N/A				
		· · · · · · · · · · · · · · · · · · ·		
				
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	e date of each amendment(s) adoption: 1706057 1,2018 ethis document was signed.	, if other than th
Effe	ective date if applicable: AUGUST 1, 7018 (no more than 90 days after amendment file date)	
Not doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be tument's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	
Ø	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 August 1, 2018	
	Signature Junear B. Hillard Societary Incorporator (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)	-
	JORDAN B. HILLARD	
	(Typed or printed name of person signing)	
	SECRETARY INCORPORATOR (Title of person signing)	