N/800000 7601

(Requ	estor's Name)	
(Addre	ess)	. ,
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

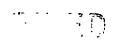
DISTRICT 12 AFG NAME OF CORPORATION:	, INC.		
N18000007801 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subr	mitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Sandra K. Smith			
	(Name of Contact Po	erson)	<u> </u>
DISTRICT 12 AFG. INC.			
	(Firm/ Company	·)	
6937 Country Lakes Circle			
	(Address)		
Sarasota, FL 34243			
	(City/ State and Zip (Code)	***************************************
d12treasurerp58@gmail.com			
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
Sandra K. Smith	at	340	227-5121
(Name of Contact Person)	•		(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida I	Department of S	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	-	Certifi s Certifi	ed Copy ional Copy is
Mailing Address		eet Address	
Amendment Section Division of Corporations		nendment Sectivision of Corpo	
Division of Corporations	DIV		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation	as curr	ently filed with the Flo	7319 007 = 0 PH : orida Dept. of State)
DISTRICT12 AFG, INC.			
(Docum	nent Nur	mber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Flor imendment(s) to its Articles of Incorporation:	rida Stati	utes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corpor	ation:	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ration" or "incorporat	
B. Enter new principal office address, if applica Principal office address MUST BE A STREET A		N/A 'S)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		N/A 	
 If amending the registered agent and/or registered agent and/or the new register 			a, enter the name of the
Name of New Registered Agent:	N/A		
	N/A		
New Registered Office Address:		•	Florida street address)
	N/A		, Florida
		(City)	(Zip Code)
iew Registered Agent's Signature, if changing R hereby accept the appointment as registered agen	Registere t. / am j	ed Agent: familiar with and accep	of the obligations of the position.
_		Signature of New Regi	stered 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	PT John V Mike SV Sally		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
X Change	D/C	Gretchen Sciarrino	2817 Valley Forge St
Add			Sarasota, FL 34239
Remove			
2) Change	Director Co-Chair	Olivia Bigi	3818 San Luis Drive
x Add			Sarasota, FL 34235
Remove 3) X Change	D/S	Jocelyn Spann	328 Matisse Cir S
Add			Nokomis, FL 34275
Remove			
4) Change	D/T	Sandra K Smith	6937 Country Lakes Circle
Add			Sarasota, FL 34243
Remove			
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)
N/A
- · · · · · · · · · · · · · · · · · · ·

September 28, 2019	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
September 28, 2019	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	t be listed as the
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	
Signature Sheloten Maianing, Dis/Chair	
(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)	
GRETZHEN SCIARKIND (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
DIRECTOR / CHAIRPERSON (Title of person signing)	
(Title of person signing)	