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SECREIMRY OF STATE TALLAHASSEE, FL

2018 OCT 18 PM 1: 10

## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Iroquis Tribe of NAME OF CORPORATION:	the Seminole Nation (Indian Princesses), Inc.
N18000009621 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	mitted for tiling.
Please return all correspondence concerning this matt	
Robert C. Brighton, Jr.	
	(Name of Contact Person)
Brighton Legal Solutions P.A.	
	(Firm/ Company)
6285 NW 125 Avenue	
	(Address)
Coral Springs, Florida 33076	
	(City/ State and Zip Code)
rcbrightonbizlaw@gmail.com	
E-mail address: (to be used	I for future annual report notification)
For further information concerning this matter, please	call:
Robert C. Brighton, Jr.	954 701-8961
(Name of Contact Persor	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
<u> </u>	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address  Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

## FILED

Articles of Incorporation 2018 OCT 18 PM 1: 10

SECRETARY OF STATE The froquis Tribe of the Seminole Nation (Indian Princesses), Inc. (Name of Corporation as currently filed with the Florida Dem! of St N18000009621 (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: The Iroquois Tribe of the Seminole Nation (Indian Princesses), Inc. 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) (City) 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 Sr	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address
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Remove					-
2) Change		_			
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. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)			
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	he date of each amendment(s) adoption:ate this document was signed.	, if other than the
Effe	ffective date <u>if applicable</u> :	
	(no more than 90 days after am	endment file date)
	ote: If the date inserted in this block does not meet the applicable statute ocument's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as the
Ado	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number was/were sufficient for approval.	r of votes east for the amendment(s)
	There are no members or members entitled to vote on the amendment adopted by the board of directors.	(s). The amendment(s) was/were
	October 15, 2018 Dated	
	Signature  (By the chairman or vice chairman of the board, prohave not been selected, by an incorporator – if in to other court appointed fiduciary by that fiduciary)	
	Robert C. Brighton, Jr.	
	(Typed or printed name	of person signing)
	Incorporator	
	(Title of per	rson signing)