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(Requestor's Name)

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(City/State/Zip/Phone #)

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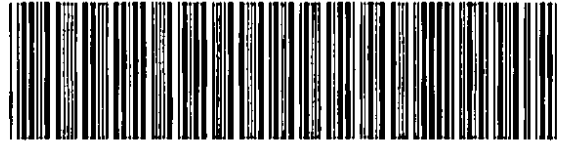
(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF JUSTICE

STATE ARCHIVES

2022 SEP - 1 PM 12:45

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN TAMPA, INC

NAME OF CORPORATION: \_\_\_\_\_

N18000011228

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHELLA MILLER

\_\_\_\_\_  
(Name of Contact Person)

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN TAMPA, INC

\_\_\_\_\_  
(Firm/ Company)

6317 JACQUELINE ARBOR DRIVE

\_\_\_\_\_  
(Address)

TEMPLE TERRACE, FL 33617

\_\_\_\_\_  
(City/ State and Zip Code)

aaawtampabranchpresident@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHELLA MILLER

813

731-5903

\_\_\_\_\_  
(Name of Contact Person)

at \_\_\_\_\_  
(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN TAMPA, INC.

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2022 SEP - 1 PM 12:45

(Name of Corporation as currently filed with the Florida Dept. of State)

N18000011228

SECRETARY  
TALLAHASSEE, FL

(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 new 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.*

6317 Jaqueline Arbor Drive

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS) Temple Terrace, FL 33617

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 172715

TAMPA, FL 33672

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:

Shella Miller

Name of New Registered Agent:

6317 Jaqueline Arbor Drive

(Florida street address)

New Registered Office Address:

Temple Terrace

33617

, Florida

(City)

(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.*

*Shella Miller*

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Johnson Austin, Sandra, Dr</u>	<u>3175 Grand Avenue Apt 206</u> <u>Pinellas Park, FL 33782</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>P</u>	<u>Shella Miller</u>	<u>6317 Jaqueline Arbor Drive</u> <u>Temple Terrace, FL 33617</u>
3) <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>CFO</u>	<u>Hovi, Lucinda, Dr.</u>	<u>1200 Country Club Drive Apt 3302</u> <u>Largo, FL 33771</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>CFO</u>	<u>Shoemo, Ebony, Dr.</u>	<u>2010 Oakwood Knoll Court</u> <u>Valrico, FL 33596</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: 07/01/2022, if other than the date this document was signed.

Effective date if applicable: (no more than 90 days after amendment file date)

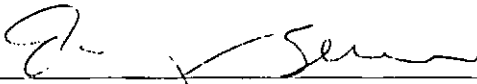
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 8/28/2022

Signature 

(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)

Ebony Shoemo

\_\_\_\_\_  
(Typed or printed name of person signing)

Chief Financial Officer  
(Title of person signing)

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STATION 1  
TALLAHASSEE, FL