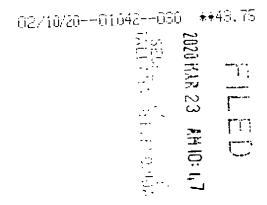
N1900000 1694

(Requestor's Name)
(Address)
(Address)
(City/StateFig/Dhone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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Amend

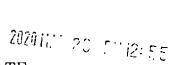
MAR 24 2020
I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Women of Massau Inc.
DOCUMENT NUMBER: N 1900001694
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Carolyn Glaza (Name of Contact Person)
Women of Wassau (Firm/Company)
95224 Amelia National Pky.
Fernandina Beach FL 32034 (City/ State and Zip Code)
Kansascarolyn 2014 e. graail. com E-mail address: (to be used or future annual report notification)
For further information concerning this matter, please call:
Carolyn Glaza at 904-310-677 = (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional copy is Certified Copy (Additional Copy is Enclosed) □ \$52.50 Filing Fee Certificate of Status (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Meet Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303





FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2020

CAROLYN GLAZA 95224 AMELIA NATIONAL PKWY FERNANDINA BEACH, FL 32034

SUBJECT: WOMEN OF NASSAU, INC.

Ref. Number: N19000001694

We have received your document for WOMEN OF NASSAU, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the date that the original document was filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 720A00004910

Irene Albritton Regulatory Specialist II

www.sunbiz.org

A	articles	of Amendme	nt			
Ar	rticles	to of Incorporat	ion			
(Name of Corporation as currently filed with the Flor	rida D	of ept. of State)	sau	, Inc	<u> </u>	
(Document 8	Vumbe	r of Corperation	on (if known)			
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes	s, this <i>Florida</i>	Not For Proj	lit Corporation	r adopts the t	ollowing
A. If amending name, enter the new name of the corp	porati	on:				
name must be distinguishable and contain the word "cor	razarziti	on" or "Incor	norated" or t	ha abbravizatio		The new
"Company" or "Co." may not be used in the name.	грогии	on or incorp	portilea or i	ne aobreviano	n Corp. or	1716
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)					
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	· ')					7020 H.A. 23
					· · ·	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of			lorida, enter	the name of	<u>the</u>	ان. ان:
Name of New Registered Agent:					· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			(Florida si	rcet address)		
				, Flori		
		(City)		(Zi	p Code)	
New Registered Agent's Signature, if changing Regist Thereby accept the appointment as registered agent. To	tered <u>/</u> am fan	Agent: niliar with and	accept the ol	oligations of th	e position	
	Sig	nature of New	Registered A	gent, if chang	ing	

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:

 $P = President; V \neq Vice President; T \neq Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk: CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Doe Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) <u>X</u> Change Add	T	dwal	Bostwick	97571 P Twee, F	ivates Wo
Remove				32097	
2) Change Add					
Remove 3) Remove Add Remove					
4) Change Add					
Remove					
5) Change Add				-	
Remove					
6) Change Add					
Remove					
E. If amending or addi- (attach additional she		onal Articles, enter cha essary) (Be specific)	nge(s) here:		
					.
				<u></u>	
					** ** ** **

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M \ = =	
The date of each amendment(s) adoption: March 5,2020 . if other that date this document was signed. Effective date if applicable: March 5,2020	in the
date this document was signed.	
Effective date if applicable: March 2020 (no more than 90 days after amendment file date)	
(no more than 90 days after amenament 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.	ic.
Adoption 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.	

×	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 March 19, 2020
	Signature Cardyu Ilazo
	(By the chairman or Vce chairman of the bord, 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)
	(Taped or printed name of person signing)
	Proceedent

(Title of person signing)