# N 19000001828

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	s Inc.
N19000001828 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning thi	is matter to the following:
Chelsey Velilla	
	(Name of Contact Person)
Arching Oaks Inc.	
	(Firm/ Company)
37114 North Thrill Hill Road	
	(Address)
Eustis, Florida 32736	
	(City/ State and Zip Code)
chelseyvelilla@yahoo.com	
E-mail address: (to E	be used for future annual report notification)
For further information concerning this matter,	please call:
Chelsey Velilla	757 8175955
(Name of Contact	
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of S	

## 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

Arching Oaks Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N19000001828 (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: Arching Oaks Art and Culture Center 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A \_, 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.

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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	N/A		
Remove			
2) Change Add	N/A		
Remove 3 ) Change Add Remove	N/A		
4) Change Add	<u>N/A</u>		
Remove			
5) Change Add	N/A		
Remove			
6) Change Add	N/A		
Remove			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	
N/A			

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The date of each amendment date this document was signed	(s) adoption: N/A				, if other than the
·	May 20, 2020				
Effective date <u>if applicable</u> :		than 90 days after	amendment file date	2)	
Note: If the date inserted in the document's effective date on the	ris block does not med he Department of Stat	et the applicable sta te's records.	tutory filing require	ments, this date will no	t be listed as the
Adoption of Amendment(s)	(CHEC	K 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.					
	May 20, 2020					
	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)					
	Chelsey Velilla					
	(Typed or printed name of person signing)					
	Vice President- Arching Oaks Inc./Arching Oaks Art and Culture Center Inc.					
	(Title of person signing)					