# N1900000 2613

	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #	)
PICK-U	IP WAIT	MAIL
	(Business Entity Name	<u> </u>
	(Document Number)	
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### **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION:
DOCUMENT NUMBER: 1170000021017
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANTONIO WOODOWY (Name of Contact Person)
20 20 20 20 20 20 20 20 20 20 20 20 20 2
(Firm/ Company)
27570 My 1523+1cct 2 (Address)
$\frac{1}{2} \frac{1}{2} \frac{1}$
E-mail address: (to be used for future annual report notification).
For further information concerning this matter, please call:
(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:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

01	
Y5 10C	
(Name of Corporation as currently filed with the Florida Dept. of State)	
NU900007(013)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
Ubuntu Initiative Inc.  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.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	÷\$.,,
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C. Enter new mailing address, if applicable:	732
(Mailing address MAY BE A POST OFFICE BOX)	9.E.B.
	S.S.
	25
<del></del>	OH OH OH
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:	
- Mielle I ('omi	MAI
Name of New Registered Agent:	
CONDIQUE ON	( 103-
(Florida street address)  New Registered Office Address:	110
MIOVNI 2212	$\langle \! \langle$
(City) Florida (Zip Code)	<i>λ</i> 0
N. D. Charles and A. L. W. Ciller, and C. C. Charles and A. L. W. C.	
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>V</u> <u>Mil</u>	in Doe ke Jones ly Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		
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Remove 4) Change				11100111		) (
Add						
5) Change		<del>-</del>		<u> </u>	<del></del>	
Remove						
6) Change						
Remove						

E.	If amending or adding additional Arti	icles, enter change(s) here:
	If amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adoption: date this document was signed.	if other than the
Effective date if applicable:	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
☐ The amendment(s) was/were adopted by the was/were sufficient for approval.	e members and the number of votes cast for the amendment(s)
Dated  Signature  (By the chairman or vice have not been selected,	chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or ductary by that fiduciary)  (Typed or printed name of person signing)

Direct

(Title of person signing)