

# N19000008548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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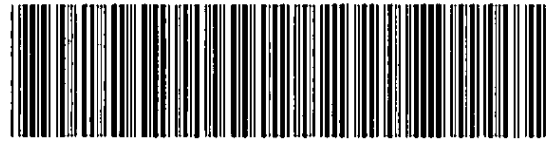
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2023 JUL 20 PM 2:29

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Cultural Hwb of NW Florida INC

DOCUMENT NUMBER: N190000008548

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

Please return all correspondence concerning this matter to the following:

Sarah Bailey

(Name of Contact Person)

(Firm/ Company)

4300 S. Palo Alto Ave

(Address)

Panama City FL 32401

(City/ State and Zip Code)

awake.curate@gmail.com

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

For further information concerning this matter, please call:

Sarah Bailey

(Name of Contact Person)

at (850) 960 8704

(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

Cultural Hwb of NW Florida Inc  
(Name of Corporation as currently filed with the Florida Dept. of State)

N 19 00000 8548  
(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:

Anima Arts, 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)

424 Harrison Ave  
Panama City FL  
32401

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

430 S. Palo Alto Ave  
Panama City, FL  
32401

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: Sarah Bailey  
430 S. Palo Alto Ave  
(Florida street address)

New Registered Office Address:  
Panama City, Florida 32401  
(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

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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

Type of Action  
(Check One)

Title

Name

Address

- |  |           |                          |   |
|--|-----------|--------------------------|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add   | <u>P</u>  | <u>Massey, Startlett</u> | <u>3833 Central Ave</u><br><u>St Petersburg FL</u><br><u>33713</u>      |
| <input checked="" type="checkbox"/> Remove   |           |                          |   |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add   | <u>VP</u> | <u>marcelli, Angela</u>  | <u>3833 Central Ave</u><br><u>St Pete FL</u><br><u>33713</u>            |
| 3) <input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>S</u>  | <u>Barker, Nikki</u>     | <u>3833 Central Ave</u><br><u>St Pete FL</u><br><u>33713</u>            |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove   | <u>D</u>  | <u>Ogren, Kim</u>        | <u>1205 Maniposa Ave</u><br><u>#406 Coral Gables FL</u><br><u>33146</u> |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove   | <u>D</u>  | <u>Bermen, Elizabeth</u> | <u>36 W. Beach Dr</u><br><u>PL FL</u><br><u>32401</u>                   |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove   | <u>D</u>  | <u>Smith, Cynthia</u>    | <u>307 Linda Ave</u><br><u>PL FL</u><br><u>32401</u>                    |

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

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

remove	<u>D</u>	<u>White, Mark</u>	<u>36 W. Beach Dr.</u>
remove	<u>D</u>	<u>Amromin, Pavel</u>	<u>PL FL</u>
remove	<u>D</u>	<u>Burch, Tesi</u>	<u>32401</u>

ADD C Sarah Bailey 430 S. Palo Alto Ave PC FL 32401

ADD T Mary-Morgan Godwin 1900 Tyndall Dr. PC FL 32401

ADD S Emily Hill 430 S. Palo Alto Ave PC FL 32401

ADD D Leta Daniels 413 S. Palo Alto Ave PC FL 32401

The date of each amendment(s) adoption: \_\_\_\_\_, 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 7-19-2023

Signature Cynthia L Smith  
(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)

CYNTHIA L. SMITH  
(Typed or printed name of person signing)

DIRECTOR  
(Title of person signing)

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2023 JUL 20 PM 12:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA