(Requestor's Name) (Address) (Address)	800356804978
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  rtified Copies Certificates of Status Special Instructions to Filing Officer:	01/04/2101021020 **35.00
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## COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Coalition for the Homeless of Central Florida, Inc				
DOCUMENT NUMBER: N19452				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Allison Krall	(Name of Contact Person)			
	(Name of Contact Person)			
Coalition for the Homeless of Central Florida, Inc				
(Firm/ Company)				
18 N. Terry Ave				
	(Address)			
0.1				
Orlando, FL 32801	(City/ State and Zip Code)			
allison.krall@ctlhomeless.org E-mail address: (to be used	I for future annual report notification)			
For further information concerning this matter, please	eall:			
Allison Krall (Name of Contact Person	at <u>407</u> <u>426-1254</u> (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:			
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee &       □\$52.50 Filing Fee         Certified Copy       Certificate of Status         (Additional copy is enclosed)       Certified Copy         (Additional copy is Enclosed)       Enclosed)			
<u>Mailing Address</u> 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

Coalition for the Homeless of Central Florida. Inc		-1. F" S: 09
(Name of Corporation as currently filed with the Florid	la Dept. of State) - U.	
N19452		
(Document Nu	mber of Corporation (i	řknown)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	antes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorpora	The new ted" or the abbreviation "Corp." or "Inc."
<u>Company or Co, may not be used in the name</u> .		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> )	<u>SS</u> )	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		<u>da, enter the name of the</u>
Name of New Registered Agent:		
		(Florida street address)
<u>New Registered Office Address;</u>		
		Florida
	(City)	(Zip Code)

.

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam 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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeheld, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Curren!!, 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mi</u>	<u>n Doe</u> <u>xe Jones</u> <u>ly Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>_C</u>	Jane Tebbe-Shemelya	U1413 Lake Butler Blvd Windermere, FL 34786
X Remove			·····
2) <u>×</u> Change Add	<u>C</u>	Rich Wahl	595 Edgerly Place Orlando, FL 32806
3) X Change Add Remove	<u>VC</u>	Kris Gault	646 W. Smith Street Unit 207 Orlando, FL 32804
4) Change _X Add	<u> </u>	Ben Lalikos	420 S. Orange Ave Suite 150
Remove			Orlando, FL 32801
5) Change Add			
Remove			
6) Change Add			
Remove			·····

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (attach additional sheets, if necessary). (Be specific)

Effective date if applicable: October 30, 2020

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(no more than 90 days after amendment file date)

<u>Note:</u> 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 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 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)

Rich Wahl

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(Typed or printed name of person signing)

Chairman of the Board

(Title of person signing)