## N20006613078

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TALLAHASSEE, FL



TO: Amendment Section Division of Corporations		
ZETA PHI BETA SORORIT NAME OF CORPORATION:		ZETA ZETA CHAPTER
N20000003078 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted fo	r filing.	
Please return all correspondence concerning this matter to the	following:	
Avis McIntosh, Treasurer		
(Name e	of Contact Person)	
ZETA PHI BETS SORORITY, INCORPORATED CHI ZET.	AZETA CHAPTER	
(Fit	-m/ Company)	
P.O. BOX 211525		
	(Address)	
ROYAL PALM BEACH, FL 33421-3186		
(City/ S	tate and Zip Code)	
Chrzetazeta@gmail.com		
E-mail address: (to be used for futu	re annual report notificatio	n)
For further information concerning this matter, please call:		
Avis MeIntosh	561 at	688-3122
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Department of	State:
	Tied Copy Certif itional copy is Certif	icate of Status ied Copy tional Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Sect Division of Corp The Centre of T 2415 N. Monro	orations

Tallahassee, FL 32303

## COVER LETTER

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## Articles of Amendment to Articles of Incorporation of

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An	ticles of Incorporation of	,
ZETA PHI BETA SORORITY, INCORPORATED CHI	I ZETA ZETA	
(Name of Corporation as currently filed with the Flor	ida Dept. of State)	2024 JUL 31 PH 1: 4
N2000003078		
(Document N	umber of Corporation (if known)	IALLAHASSEE. FI
Pursuant to the provisions of section 617,1006, Florida St amendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not For Profit Cor</i>	poration adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abl	previation "Corp." or "Inc."
<b>B.</b> Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u> )	ESS )	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
D. <u>If amending the registered agent and/or registered</u> new registered agent and/or the new registered off		ame of the
Name of New Registered Agent:		·
<u>New Registered Office Address:</u>	(Florida street add	dress)
		_, 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 = 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John Dc</u> <u>V</u> <u>Mike Jo</u> <u>SV</u> <u>Sally Sr</u>	nes	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>p</u>	Christine Rouse	5095 Foxhall Drive North West Palm Beach, FL 34417
X Remove	р	Erna Foushee'	565 Toxaway Drive
2) Change Add	<u> </u>	Ema Fousiee	West Palm Beach, FL 33413
3) Remove 3) Change Add Remove			
4) Change Add			
Remove			
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)

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	<u></u>			
				<u> </u>
The date of each amendment(s) adoption	on:			, if other than the
date this document was signed.				
Effective date <u>if applicable</u> :	(no more than 90 days		lo data)	
	(no more than 90 days	agter amenament fil	ie aale)	
Note: If the date inserted in this block do	es not meet the applica	ble statutory filing r	equirements, this date wi	Il not be listed as the
document's effective date on the Departm	ent of State's records.		1	
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Adoption of Amendment(s)

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(<u>CHECK ONE</u>)

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.

	07/16/2024
Dated	
Signature	Erna Austra
	(By the chairman or vice chairman of the hoard pro

(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)

Erna Foushee'

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(Typed or printed name of person signing)

President

(Title of person signing)