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## **COVER LETTER**

TO: Amendment Section Division of Corporations mpact community center INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

(Additional copy is

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

Certified Copy (Additional Copy is

Enclosed)

Tallahassee, FL 32303

## Articles of Amendment

to

Articles of Incorporation

IMPact Communit	y center	INC.
(Name of Corporation as currently filed with the	Florida Dept. of State	
Nacc	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
(Docum	ent Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> )	
D. If amending the registered agent and/or regis new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		· -
Traine by the winds given considering.		
New Registered Office Address:	(Fle	orida street address) :
		- Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered Agent: t. I am familiar with and accept	the obligations of the position.
_	Signature of New Registe	ered 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 John E V Mike J SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>Vpo</u> rV	Gaynell Bland	770 cayce lone. Fort myers, Florid
Remove  2) Change Add	<u>VP</u> c s V	Kaycie Zorbas	324 NE 30th Terr Cape coral FL 3390
Remove Change Add	CEO	Keri Jewe-1-6iRS	3631 Minne sota Drive fort myer Florida
Remove 4) Change Add	T	Gaynell Bland	770 CCyce I civil Fortmuers, Florida
<ul><li> Remove</li><li> Change</li><li> Add</li></ul>			<del>95-10)</del>
Remove 6) Change Add		<del></del>	
		rticles, enter change(s) here:	
(attach additional s	heets, if necessary).	(Be specific)	
<del></del>			

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		*
The date of each amendment(s) adoption: date this document was signed.	, if oth	er than the
Effective date if applicable:		
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be listed of State's records.	d as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

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 $\frac{1/5/2024}{4/6}$
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)
Keri Jewett-Giles
(Typed or printed name of person signing)
Pres / CEO (Title of person signing)
(Title of person signing)