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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

I.D. A HOUS	E CATASTROPHE SERVI	CES, INC.	
N2000008645 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	are submitted for filing.		
Please return all correspondence concerning the	is matter to the following:		
Leon C. Seabrooks, Sr.			
	(Name of Contact Po	erson)	
1.D. A House Catastrophe Services, Inc.			
	(Firm/ Company	·)	<u> </u>
614 Maple Avenue			
	(Address)		
Panama City, FL 32401			
	(City/ State and Zip	Code)	
lseabrooks@idahouse4u.com			
E-mail address: (to	be used for future annual rep	oort notificatio	n)
For further information concerning this matter,	please call;		
Leon C. Seabrooks, Sr.	at	850	404-9450
(Name of Contact	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of \$		Certif s Certif	icate of Status ied Copy tional Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sect vision of Corpo te Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LD. A HOUSE CATASTROPHE SERVICES, INC.

Dept. of State)						
nber 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:						
ation:						
The new						
ration" or "incorporated" or the abbreviation "Corp." or "Inc."						
N/A						
\underline{S})						
N/A						
fice <u>address in Florida, enter the name of the</u>						
address:						
(Florida street address)						
, Florida						
(City) , Florida, (Zip Code)						
ed Agent: familiar with and accept the obligations of the position.						
Signature of New Registered Agent, if changing						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add		N/A	
Remove 3) Change Add Remove		N/A	
4) Change Add		N/A	
Remove			
5) Change Add		N/A	
Remove			
6) Change Add		N/A	
Remove			
E. If amending or addit (attach additional shee	ig additi	onal Articles, enter change(s) here: essary). (Be specific)	
A. This Corporation is or	ganized :	and operated exclusively for charitable purposes	within the meaning of Internal Revenue
Code Section 501 (c) (3)			
B. No substantial part of	the activ	rities of this Corporation shall consist of carrying	g on propaganda, or otherwise attempting
to influence legislation, a	ınd the co	orporation shall not participate or intervene in an	y political campaign
(including the publishing	or distri	bution of statements) or on behalf of any candid	ate for office.

C. The property of this Corporation is irre	vocably dedicated to charitable purposes and no part of the net income	or assets
of this corporation shall ever inure to the b	enefit of any director, officer or member thereof or to the benefit of any	y'
private person.		
D. Upon the dissolution or winding up of	this Corporation, its assets remaining after payment, or provision for pa	iyment
of all debts and liabilities of this corporation	on shall be distributed to a nonprofit fund, foundation or corporation when	nich
is organized and operated exclusively for c	haritable purposes and which has established its tax exempt	
status under Section 501 (c) (3) of the Inter	rnal Revenue Code.	
		
		
	N/A	
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date will nort of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

_	
ignature _	y the chairman or vice chairman of the board, president or other officer-if directors
h	by the chairman of 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)
	Leon C. Scabrooks, Sr.
	(Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.