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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Jacksonville Chapter of the Womens A	Army Corps Veterans Association, Inc.
DOCUMENT NUMBER: N21000002756	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	g:
Rhonda Hart-Sparks	
(Name of Contac	et Person)
Jacksonville Chapter of the Womens Army Corps Veterans Association	n, Inc.
(Firm/ Comp	pany)
1100 Kings Road Suite 43215	
(Address	;)
Jacksonville, FL 32203	
(City/ State and 2	Zip Code)
presidentwacva56@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, please call:	2 S
Rhonda Hart-Sparks	808 2303430 S
(Name of Contact Person)	(Area Code) (Daytime Telephone Number):
Enclosed is a check for the following amount made payable to the Flori	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee Certificate of Status	Certificate of Status
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

Jacksonville Chapter of the Womens Army Corps Vetterans Association, Inc.

Name of Corporation as currently filed with the Florida	Dept. of State)	
59-2454688		
(Document Num	nber of Corporation (if known)	
	•	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpora	ation:	
		776
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable:	1100 Kings Road Suite 43215	
(Principal office address MUST BE A STREET ADDRES.	S) Jacksonville, FL 32203	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A ROST OFFICE BOX)	Women Armys Corps - AWU	
	P.O Box 43215	
	Jacksonville, FL 32203	
		(2) (2)
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		<u>e</u>
Name of New Registered Agent:		iš_
New Registered Office Address:	(Florida street address)	ယ္
	. Florid	, <u></u>
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Code)
New Registered Agent's Signature, if changing Registere	d Agent:	
hereby accept the appointment as registered agent. I am f		position.
	, ,	
	Signature of New Registered Ayent, if changing	7

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>	Address
1) × Change Add	<u>P</u>	Demika Jackson	1100 Kings Road Suite 43215 Jacksonville, FL 32203
Remove 2) × Change Add	<u>1PP</u>	Rhonda Hart-Sparks	1100 Kings Road Suite 43215 Jacksonville, FL 32203
Remove 3)	<u>T</u>	Carla Mercer	Jacksonville, FL 32203
4) × Change Add	VP	Doreen Lance	1100 Kings Road Suite 43215 Jacksonville, FL 32203
Remove 5) Change Add			
Remove 6) Change Add			
		nal Articles, enter change(s) here: ssary). (Be specific)	
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The date of each amendment(s) date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by 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 September 23, 2023
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)
(Typed or printed name of person signing)
Immediate Past President
(Title of person signing)