N2100000H720

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	i
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



300370884133

08/05/21--01021--004 **35.00

R WHITE AUG 18 2001

T. -0 70 20 06

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	: American Indian Mo	ovement Florida State	<u> </u>	- · · · · ·
DOCUMENT NUMBER: <u>N</u>	21000004720			·
The enclosed Articles of Amer	idment and fee are sub	mitted for filing.		
Please return all correspondence	ce concerning this matt	er to the following:		
Kevin Larry Knudsen				
		(Name of Contact Po	erson)	
American Indian Mayamant E	Torido Stata			
American Indian Movement F	iorida State	(Firm/ Company	/)	
		(,	
2230 WHITFIELD PARK DE	IVE I-12			
		(Address)		
SARASOTA, FL 34243			~	·
		(City/ State and Zip	Code)	
1	_			
larry@indigenousinmusic.com E-n	nail address: (to be used	for future annual rep	ort notification	i)
For further information concer	nino thia mottar inlanca	, coll.		
roi turdiei information concer	ming mis matter, piease	· • • • • • • • • • • • • • • • • • • •		
Kevin L Knudsen		at	936	628-4837
	ame of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fol	lowing amount made p	ayable to the Florida	Department of	State:
■ \$35 Filing Fee	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	D Filing Fee icate of Status ied Copy tional Copy is esed)

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

American Indian Movement Florida State Inc.	<u>.</u>	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	(1217: -5 + 12:56
N21000004720		
	Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida No.	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
American Indian Movement Central Florida Inc.		The new
name must be distinguishable and contain the word "co <u>"Company" or "Co," may not be used in the name</u> .	orporation" or "incorpo	rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u>)	
	-	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of the		rida, enter the name of the
new registered agent and/or the new registered of	office address.	
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:	
I hereby accept the appointment as registered agent.		cept the obligations of the position.
	Signature of New R	egistered 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 Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	D	Robert Rosa	Deltona, Fl. 32725
Remove		•	
2) Change Add	Ð	Sheridan Murphy	2230 Whitfield Park Drive Sarasota, Florida, 34243
Remove Change X Add Remove	D	Stuart Flores	2230 Whitfield Park Drive Sarasota, Florida, 34243
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee.		cles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·			· · · · · ·
			

·		
		
		
		
		
	•	
		
		
·		
		
	·	
·		
The date of each amendment(s) as	doption:	_, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.	

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 07/27/2021
(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)
Kevin Larry Knudsen
(Typed or printed name of person signing)
President
. (Title of person signing)