## N2100000690H

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

FIRST COAST (	QUILTERS GUILD INC
N21000006904	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
CHRISTINA FLORES	
	(Name of Contact Person)
FIRST COAST QUILTERS GUILD INC	
	(Firm/ Company)
PO BOX 156	
	(Address)
ORANGE PARK, FL 32067	
	(City/ State and Zip Code)
DSTY22@YAHOO.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	case call:
CHRISTINA FLORES	208 919-1100
(Name of Contact Pe	rson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Stat	The state of the s
Mailing Address	Street Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

FIRST COAST QUILTERS GUILD INC		
Name of Corporation as currently filed with the Florida	Dept. of State)	
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuamendment(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:	
N/A		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	N/A S)	
· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 156	<b>RZ JA</b>
	ORANGE PARK, FL 32067	JAN 28
		N. 04 N. 05 N. S.
D. If amending the registered agent and/or registered of		
new registered agent and/or the new registered office	address:	· 🛱 🙃
Name of New Registered Agent: N/A		
	(Florida stree	n address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	d Agent: familiar with and accept the oblig	gations of the position.
<del></del>	Signature of New Registered Age	ent, 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 D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	KATHY WRAY	2049 UNION RD MIDDLEBURG, FL 32068
<ul> <li>X Remove</li> <li>2) Change Add</li> </ul>	<u>v</u>	MICHELE SMITH	590 CHARLES CARROL ST ORANGE PARK, FL 32073
X   Remove	<u>\$</u>	BARBARA HOFFMAN	4008 APPALOOSA RD MIDDLEBURG, FL 32068
4) Change Add	<u>S</u>	BETTY ACREE	3621 VANDEN CT JACKSONVILLE, FL 32222
Remove  5) Change	<u>P</u>	RHODA NEWTON	1955 GUARDED WAY FLEMING ISLAND, FL 32003
Remove  6) Change  × Add	VP	KATHY MINTON	1872 WENTWORTH LANE GREEN COVE SPRINGS, FL 320
E. If amending or addi (attach additional she		ticles, enter change(s) here: (Be specific)	
ARTICLE II - PURPOS	E		
The purpose of this Guil	d is to preserve the	e heritage of quilting, to be a source of	
information and inspirate	ion, to perpetuate	a high quality of excellence in quilting and	
related arts, and to be a	gathering place for	people with a common interest. To further	
these goals, we provide	educational opport	tunities to our members and the community.	

We select local organizations to receive charity quilts from all members to help
individuals in our community. We also raise money by selling a quilt made by the
members and giving proceeds to local organizations that help the elderly, youth, or those in need.
ARTICLE XI - DISSOLUTION
In the event that the Elected Officers deems dissolution of the corporation necessary, the President shall
call a meeting of the members to take place no later than 30 days following this recommendation. At this
meeting a vote by written ballot shall be taken concerning the dissolution of the corporation. A two thirds
vote in favor of such a dissolution by those members in attendance and voting at this meeting shall be
required before the Elected Officers implements the following:
Any assets of the corporation shall be applied and distributed first to the final payment and discharge of
any liability or obligation of the corporation. Any remaining assets of the corporation shall be distributed to
a museum(s) or similar organization whose purpose(s) is similar to those of First Coast Quilters Guild and
then qualified as tax-exempt corporations under Section 501(c)(3) of the Internal Revenue Code, or cooresponding section of
any future federal tax code. Any assets not so disposed of shall be disposed by a court of competent jurisdiction in the county
in which the principal office of the corporation is located, exclusively to Section 501(c)(3) qualified organizations,
as said court shall determine. Proper notification shall be made to the State, Internal Revenue Service
and any other entity that may be required.
The date of each amendment(s) adoption:
Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

	01 (12/2022
Dated	01/13/2022
Signatur	Churtua on Alous
. ignitia	(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)
	Christina Flores
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)  Treasurer