N21000009415

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

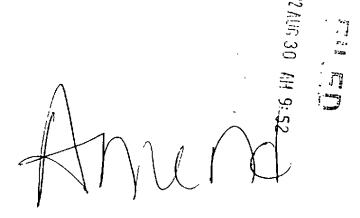
Office Use Only



300372475303

RECFIVED
AUG 3 0 2021

08/31/21--01005--007 **35.00



SEP 1 1 2021 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION	Successful Returnin	g Citizens Incorpo	orated	
DOCUMENT NUMBER:	N21000009415			
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	ter to the following	; :	
Derrick L. Robinson				
· · · ·		(Name of Contac	t Person)	·
Successful Returning Citize	ns, Inc.			
		(Firm/ Comp	pany)	
425 E. 19th Street, #203				
	.,	(Address)	
Panama City, FL 32405				
		(City/ State and Z	Zip Code)	
Derrick.Robinson@success	fulre.org			
H	-mail address: (to be used	d for future annual	report notification	on)
For further information cond	erning this matter, please	e call:		
Derrick Robinson			(850) at	481-6281
	(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Flori	da Department of	f State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)	Certi oy is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing A Amendme	ddress nt Section		Street Address Amendment Sec	tion
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flori	ida Dept. of State)	
N21000009415		
(Document No	umber of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	ESS) N/A	20
	N/A	22 NU
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	2022 AUS 30 AH 9:
	N/A	<u> </u>
	N/A	9: 52
D. If amending the registered agent and/or registered new registered agent and/or the new registered officers.	office address in Florida, e	• •
X7/A	ce address:	
Name of New Registered Agent:	·	
N/A		
New Registered Office Address:	(Flori	do street address)
N/A		, Florida ^{N/A}
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
hereby accept the appointment as registered agent. I an	n familiar with and accept th	e obligations of the position.
	Signature of New Registere	ed 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	nes en es	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	ST	Chandrieka Robinson	807 Lee Avenue Crestview, FL 32589
Remove			
2) Change Add	<u>D</u>	Lonzell Holman	504 McMillan Drive Winnsboro, TX 75594
Remove 3) Remove × Add Remove	<u>D</u>	Eric Broughton	1426 Manorway Street Tyler, TX 75702
4) Change Add	PCEO	Derrick Robinson	425 E. 19th Street, #203 Panama City, FL 32405
Remove Change Add			
Remove 6) Change Add			
(attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			
	_		
·	·		
			·

		· · · ·
_ 		
	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	
		.
		
		
	9/10/2021	
The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.	021	
Effective date <u>if applicable</u> : 8/19/20		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will not bartment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted 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.
	8/19/2021 Dated
	Signature (By the chairman or crice 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)
	Derrick L. Robinson
	(Typed or printed name of person signing)
	Incorporator
	(Title of person signing)