## N21000010630

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## **COVER LETTER**

TO: Amendment Section Division of Corporations Sanford citizens United, Inc. NAME OF CORPORATION: N21000010630 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Venerando Sequenzia, Jr. (Name of Contact Person) Sanford Citizens United, Inc. (Firm/ Company) 114 N Summerlin Ave. (Address) Sanford, FL 32771 (City/ State and Zip Code) vsequenzia@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Venerando Sequenzia, Jr. 305 525-9322 (Name of Contact Person) (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy

Mailing Address

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

(Additional copy is

enclosed)

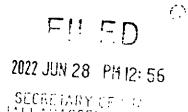
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy

Enclosed)

(Additional Copy is

## Articles of Amendment to Articles of Incorporation of



Sanford Citizens United, Inc.

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	"MELANASSEE, F
N21000010630		
(Document N	Number of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not I	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorporat	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	PESS )	
	4 4-4-4	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	) <u>N/A</u>	
	···	
	-	
D. If amending the registered agent and/or registered		a, enter the name of the
new registered agent and/or the new registered of N/A		
Name of New Registered Agent: NIA		<del></del>
New Registered Office Address:	(	Florida street address)
N/A		. Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I described the appointment of the control of the		ot the obligations of the position.
	Signature of New Regi	stered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jone Sally Smit				
Type of Action (Check One)	Title	<u>N</u>	<u>vame</u>	Address		
1) Change Add		_ <u>N</u>	N/A			
Remove			-			
2) Change Add	<u></u>					
Remove 3 ) Remove Add Remove		<u></u>	- 			
4) Change Add			<del></del>			
Remove			-			
5) Change Add			-			
Remove			-			
6) Change Add						
Remove			-			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
PLEASE ADD: ARTICL	E IX, SAI	NFORD CI	ITIZENS UNITED INC. is organized exclus	ively for charitable, religious,		
educational, and scientific	purposes	s, including	g, for such purposes, the making of distribution	ons to organizations that qualify as		
exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future						
federal tax code, within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any						
future federal tax code.						

	he federal government, or to a state or local government, for a public purpose.
purposes of sharf be distributed to t	the rederat government, or to a state of local government, for a public purpose.
<del></del>	
The date of each amendment(s) addate this document was signed.	doption: if other than the
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 be listed as the epartment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.

Dated  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)	
Venerando Sequenzia, Jr.	
(Typed or printed name of person signing)	
President	
(Title 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.