

N21000013171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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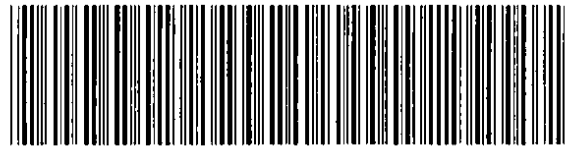
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL
JUL 26 AM 11:28

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SACRED SOULS SANCTUARY INCORPORATED

DOCUMENT NUMBER: N21000013171

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARYANN SMITH-JACKSON - DIRECTOR
(Name of Contact Person)

SACRED SOULS SANCTUARY INCORPORATED
(Firm/ Company)

600 MORNINGMIST LANE
(Address)

LEHIGH ACRES, FLORIDA 33974
(City/ State and Zip Code)

MARYANNSMITHJACKSON@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARYANN SMITH-JACKSON at 918-607-2729
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

SECRET
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, FL

2023 JUL 26 AM 11:28

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP	FRANCINE CRUMITY- BARNHILL	313 HAROLD AVENUE SE LEHIGH ACRES, FL 33973
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	TD	DEBORAH REINMILLER	18253 FERN ROAD FORT MEYERS, FL 33967
3) <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	DIRECTOR	SHAMAYA MORRIS	688 MORNINGHIST LAKE LEHIGH ACRES, FL 33974
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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TALLAHASSEE, FL

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

2023 JUL 26 AM 11:28
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TALLAHASSEE, FL

The date of each amendment(s) adoption: JULY 19TH, 2023, if other than the date this document was signed.

Effective date if applicable: JULY 19TH, 2023
(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.

Adoption of Amendment(s) (CHECK ONE)

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

- ☐ 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 JULY 19TH, 2023

Signature

Maryann Smith Jackson

(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)

MARYANN SMITH-JACKSON

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

2023 JUL 26 AM 11:28
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TALLAHASSEE, FL

716-0010