

N 22 000 000 303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

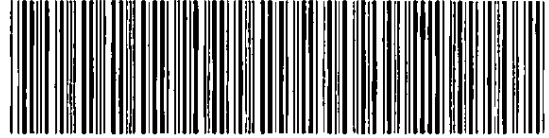
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** EPIC Community Center, Inc.

**DOCUMENT NUMBER:** N22000000303

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

Please return all correspondence concerning this matter to the following:

Ronald E. Jackson

Name of Contact Person

EPIC Community Resource Center, Inc.

Firm/ Company

655 N. Indiana Ave.

Address

Englewood, FL 34223

City/ State and Zip Code

ronnieepiccc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronald E. Jackson

Name of Contact Person

at ( 502 )

664-5190

Area Code & Daytime Telephone Number

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

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$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

Articles of Amendment  
to  
Articles of Incorporation  
of

EPIC Community Center, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

N22000000303  
(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

EPIC Community Resource Center, Inc. *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable: N/A  
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: 655A N. Indiana Ave  
(Mailing address MAY BE A POST OFFICE BOX) Englewood, FL 34223

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: N/A

(Florida street address)

New Registered Office Address:

655A N. Indiana Ave. Englewood, Florida 34223  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

N/A

*Signature of New Registered Agent, if changing*

NA

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: N/A  
(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 7-13-2023

Signature Ronald E. 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)

Ronald E. Jackson  
(Typed or printed name of person signing)

President and CEO  
(Title of person signing)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 12, 2023

RONALD E. JACKSON  
655 N. INDIANA AVE.  
ENGLEWOOD, FL 34223

SUBJECT: EPIC COMMUNITY CENTER, INC.  
Ref. Number: N22000000303

We have received your document for EPIC COMMUNITY CENTER, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION FORM, but your entity is a FLORIDA NONPROFIT CORPORATION FORM. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 123A00020845

SEP 27 2023