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SECRETARY OF STATE

7077 JUL 21 AM 9: 2

A. BUTLER
JUL 2 3 2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		'A CHAPTER OF OM	IEGA PSI PHI	FRATERNITY, INC.
DOCUMENT NUMBER:	N22000000989			
The enclosed Articles of Art	mendment and fee are sub	mitted for filing.		
Please return all correspond	lence concerning this matt	er to the following:		
ANTHONY J SPENCE				
		(Name of Contact Per	rson)	
N/A				
		(Firm/ Company)	)	
18705 SW 25TH COURT				
		(Address)		
MIRAMAR, FL 33029				
		(City/ State and Zip C	lode)	
ASPENCE288@GMAIL.C	COM			
	E-mail address: (to be used	for future annual repo	ort notification	)
For further information con	cerning this matter, please	call:		
ANTHONY J SPENCE		at	954	205-4509
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida D	epartment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Matter				

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

FILED

ALPHA DELTA ETA CHAPTER OF OMEGA PSI PHI FRATERNITY, INC. <del>2022 JUL 21 - AM-9: 21</del> (Name of Corporation as currently filed with the Florida Dept. of State) N22000000989 SECRETARY OF STATE TALLAHASSEEFFL (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: N/A 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. N/A B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address; Florida (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.

Signature of New Registered Agent, if changing

and address of each Off (Attach additional sheets, Please note the officer/dii P = President; V = Vice F	icer and/or Direct if necessary) rector title by the j President; T= Trect Chief Financial	first letter of the office title: surer: S= Secretary; D= Director; TR= Tru Officer. If an officer/director holds more tha	stee; C = Chairman or Clerk; CEO = Chief
	ves the corporation	n, Sally Smith is named the V and S. These si	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	ones	; ;
Type of Action (Check One)	Title	Name	Address
Change X Add	<u>P</u>	Jabril Muhammad	P.O. Box 652954 Miami, FL 33265
<ul> <li>X Remove</li> <li>2) Change</li> <li>X Add</li> </ul>	VP	Clayton Senior	P.O. Box 652954 Miami, FL 33265
X Remove 3) Change  X Add  X Remove	<u>s</u>	Stanley Dufour	Gregory Stephens P.O. Box 652954 Miami, FL 33265 Earnest Donaldson
4) Change Add	<u>T</u>	Demetris Dorceus	P.O. Box 652954 Miami, FL 33265
<ul> <li>X Remove</li> <li>5) Change Add</li> </ul>			Walter L. Jackson, III
Remove 6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
N/A			
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The date of each amendment(s) adoption:date this document was signed.	, if other	than the
Effective date if applicable:	han 90 days after amendment file date)	
	the applicable statutory filing requirements, this date will not be listed as	the
Adoption of Amendment(s) (CHECK		
The amendment(s) was/were adopted by the mer was/were sufficient for approval.	mbers and the number of votes cast for the amendment(s)	

	May 03, 2022
ited	
gnatur	e On O
	(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)
	Anthony J. Spence
	(Typed or printed name of person signing)
	Registered Agent



RECEIVED

2022 JUL 21 AH 10: 12

STILL TALL THE SECURE

July 7, 2022

ANTHONY J SPENCE 18705 SW 25TH COURT MIRAMAR, FL 33029

SUBJECT: ALPHA DELTA ETA CHAPTER OF OMEGA PSI PHI FRATERNITY,

INC.

Ref. Number: N22000000989

We have received your document for ALPHA DELTA ETA CHAPTER OF OMEGA PSI PHI FRATERNITY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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: 422A00015215