

N220000001218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

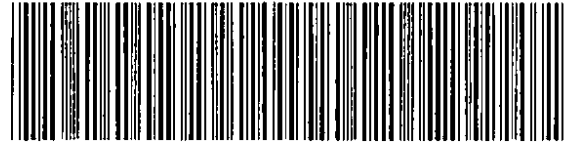
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

PINE FOREST YOUTH ASSOCIATION INC
NAME OF CORPORATION: _____

N22000001218
DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Mario Wiggins

(Name of Contact Person)

(Firm/ Company)

1214 Labelle St. Apt. 11

(Address)

Jacksonville FL 32205

(City/ State and Zip Code)

PFYARATTLERS@GMAIL.COM

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

For further information concerning this matter, please call:

MARIO WIGGINS

904

736-6605

at

(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:

☒ \$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

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PINE FOREST YOUTH ASSOCIATION INC

N22000001218

Signature of New Registered Agent, if changing

9028 JUL 10 AM 7:31
9028 JUL 10 AM 7:31
9028 JUL 10 AM 7:31

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
✓ 1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>P</u>	<u>RODERICK BOOKER</u>	<u>7862 AQUARIUS CIR S</u> <u>JACKSONVILLE, FL 32216</u>
<input checked="" type="checkbox"/> Remove			
✓ 2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	<u>P</u>	<u>MARIO WIGGINS</u>	<u>2325 McQUADE ST</u> <u>JACKSONVILLE, FL 32209</u>
<input type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>PATRICK COOPER</u>	<u>4226 HARRISON STREET</u> <u>JACKSONVILLE, FL 32207</u>
✓ 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>CHRIS SMITH</u>	<u>1749 WRIGHT AVE</u> <u>JACKSONVILLE, FL 32209</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>COVP</u>	<u>MICHEAL HOLMES SR</u>	<u>10432 SLAY RD</u> <u>JACKSONVILLE, FL 32219</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>JUSTINE VAZQUEZ</u>	<u>7824 MARSALA CT</u> <u>JACKSONVILLE, FL 32244</u>

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

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

2023 JUL 16 AM 7:31

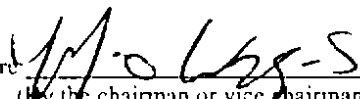
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STATE

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☐ 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 JUNE 29TH 2023

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)

MARIO WIGGINS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2023 JUL 10 AM 7:31
SECRETARY
FALL 2023