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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Goodwill Industrie	es Big Bend Foundation, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	ster to the following:
The state of the s	mer to die following.
Jack E. Kiker, III, Esq.	
	(Name of Contact Person)
Williams, Gautier, Gwynn, DeLoach & Kiker, P.A.	
	(Firn/ Company)
2010 Delta Blvd.	
	(Address)
Tallahassee, Florida 32303	
	(6) (8) (2) (2) (3)
	(City/ State and Zip Code)
Jake.Kiker@WilliamsGautier.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	c cali:
Jack E. Kiker, III, Esq.	850 386-3300
(Name of Contact Person	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
≈ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	
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

FILED

Articles of Amendment to Articles of Incorporation of

2022 DEC 20 PM 1: 24

·:

Goodwill Industries Big Bend Foundation, Inc.	••
(Name of Corporation as currently filed with the Florid	a Dept. of State)
N22000007381	
(Document Nu	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:
name must be distinguishable and contain the word "corpo "Company" or "Co." may not he used in the name.	The new ration" or "incorporated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	3207 E. 4th Street
(Principal office address MUST BE A STREET ADDRES	Springfield, Florida 32401
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3207 E. 4th Street
	Springfield, Florida 32401
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	Mce address in Florida. enter the name of the address:
Name of New Registered Agent:	
– <u>New Registered Onice Ad</u> dress:	(Floridu street uddirss.)
	, Florida
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J	d Avent: amiliar with and accept the obligations of the position.
	Signature of New Registered 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 Cierk; 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	PT John I V Mike S SV Sally S	lones		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change Add			_	
Remove				·
2) Change Add				· · · · · ·
Remove 3) Change Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				· <u>-</u>
6) Change Add				·
Remove				
E. <u>If amending or addin</u> (attach additional shee	ng additional Art ets, if necessary).	icles, enter change (Be specific)	(s) here:	
				
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			-	
The date of each amendment(s) adoption date this document was signed.	n:	-	-	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days afte	 er amendment file date		
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable s ent of State's records.	statutory filing require	ements, this date wi	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the ne	umber of votes east fo	or the amendment(s'	1

adopted by the boar	d of directors.
Dated	12/19/2022
Signature	Hang K. Oduler
Æ t	by the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or therefront appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	Board Chair (Title of person signing)
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were