## N22000008071

(R	Requestor's Name)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	th Development Organiza	ation Corporation	1
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	s matter to the following	:	
SaLisa Berrien			
	(Name of Contact	Person)	
COI Energy			
· · · · · · · · · · · · · · · · · · ·	(Firm/ Compa	any)	
3802 Spectrum Blvd, Suite 151			
	(Address)	<u> </u>	
Tampa, FL 33612			
	(City/ State and Zi	p Code)	
salisa@coienergy.com			
E-mail address: (to b	be used for future annual	report notification	n)
For further information concerning this matter,	please cail:	SUS	
SaLisa Berrien		at	(484) 225-0619
(Name of Contact I		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florid	a Department of	State:
S35 Filing Fee S\$\ \text{\$\frac{1}{2}}\$\$\$43.75 Filing Fee Certificate of St	cee & □\$43.75 Filing Fettatus Certified Copy (Additional copyenclosed)	Certif y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		Street Address	
Amendment Section	<i>!</i>	Amendment Sect	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Strive Youth Development Organization Corporation

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N22000008071		
(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corp	oration:	
COI Ladder Institute, Inc.		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered		2024 OCT 11 SECRITATION NO.
new registered agent and/or the new registered off	ice address:	i 🖚 🗓
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	(Florida street address)	<u> </u>
·		a Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at		position.
	Signature of New Registered Agent, if changing	<u> </u>

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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	Chair	SaLisa Berrien	3802 SPECTRUM BLVD., STE. 15 TAMPA, FL 33612
Remove 2)	S  Director Secretury S	Tangela D. DuPree	3802 SPECTRUM BLVD., STE. 15 (TAMPA, FL 33612
Remove 3) Change Add X Remove	DOP_	Monique Slater	3802 SPECTRUM BLVD., STE. 15 TAMPA, FL 33612
4) Change Add	<u>Treasure</u> ←	Darelee Hamilton	3802 SPECTRUM BLVD., STE. 15 TAMPA, FL 33612
Remove  5) Change	Director	Eva Vargas	3802 SPECTRUM BLVD., STE. 15 TAMPA, FL 33612
Remove  6) Change	Director	Donovan Dale Fairclough	3802 SPECTRUM BLVD., STE. 15 TAMPA, FL 33612
	sheets, if necessary)	rticles, enter change(s) here: . (Be specific)	



## Additional sheets for amending the Officers and/or Directors

Type of Action	Title	Name	Address
ADD	Vice Chair	Josh Groner	3802 SPECTRUM BLVD., STE. 151 TAMPA, FL 33612
ADD + 200	Vice Chair Programs	Tomeco Nash-Dais	3802 SPECTRUM BLVD., STE. 151 TAMPA, FL 33612
ADD	Director	Tara Patterson Hammons	3802 SPECTRUM BLVD., STE. 151 TAMPA, FL 33612

\* 2nd Vice Chair - Programs

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The date of each amendment date this document was signed	t(s) adoption:, if other	than the
Effective date if applicable:	09/30/2024	
metive date it applicable.	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be listed a he Department of State's records.	is the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes east for the amendment(s) pproval.	

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 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)
SaLisa Berrien
(Typed or printed name of person signing)
Chairperson
(Title of person signing)