

N23 UOODOC42

(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

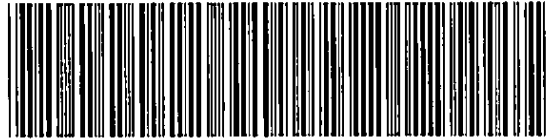
Special Instructions to Filing Officer:

Choose one amendment

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MAR 06 2023

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03/07/23--01000--009 **45.75

MAR 06 2023

2023 JUN 27 PM 3:22

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JUN 28 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BRIDGING THE GAP CENTER FOR THE ARTS, INC

DOCUMENT NUMBER: N23000000612.

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

Please return all correspondence concerning this matter to the following:

Sonya McCarter

(Name of Contact Person)

BRIDGING THE GAP CENTER FOR THE ARTS, INC.,

(Firm/ Company)

1012 NE 44th Lane

(Address)

Cape Coral, FL 33909

(City/ State and Zip Code)

sonya.mccarter@yahoo.com

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

For further information concerning this matter, please call:

Sonya McCarter

239

362 5297

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:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

BRIDGING THE GAP CENTER FOR THE ARTS, INC.,

(Name of Corporation as currently filed with the Florida Dept. of State)

N23000000612.

(Document Number of Corporation (if known))

2023 JUN 27 PM 3:22

FILED

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

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:

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: N/A

(Florida street address)

New Registered Office Address:

(City)

Florida

(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

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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ED</u>	<u>Sonya McCarter</u>	<u>1012 NE 44th Lane</u> <u>Cape Coral, FL 33909</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Lemec Bernard</u>	<u>3507 Lee Blvd suite 256</u> <u>Lehigh Acres, FL 33971</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Tijuanna Clemons</u>	<u>810 Ashland St. E.</u> <u>Lehigh Acres, FL 33974</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Cotrenia Hood,</u>	<u>5761 Golden Gate Parkway</u> <u>Naples Florida 34116</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Antwon Lindsey</u>	<u>13535 Eagle Ridge Drive, 734</u> <u>Fort Myers, FL, 33912</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Cantrella Canady</u>	<u>2500 Pony Farm Rd</u> <u>Maidens, VA 23102</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

7) X-ADD Director(Title) Chantel Rhodes (Name) 2909 Lafayette Street Fort Myers, FL 33916 (Address)

8) X- ADD Director (Title) Ivette Galarza (Name) 119220 Fairway Lakes Dr. #3 Fort Myers, FL 33913(Addre

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

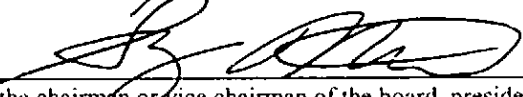
Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 2/28/23

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)

Sonya McCarter

(Typed or printed name of person signing)

Executive Director

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2023

SONYA MCCARTER
1012 NE 44TH LANE
CAPE CORAL, FL 33909

SUBJECT: BRIDGING THE GAP CENTER FOR THE ARTS, INC.
Ref. Number: N23000000612

We have received your document for BRIDGING THE GAP CENTER FOR THE ARTS, 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):

You must choose only one amendment to file.

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: 623A00012183

