## N2300009490

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~ 8|3|2024

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## COVER LETTER

Division of Corporations	
Treasure Coast	Bahamian Connection Organization, Inc
N23000009496	
The enclosed Articles of Amendment and fee ar	
Please return all correspondence concerning this	matter to the following:
Andy T Williams	
<u> </u>	(Name of Contact Person)
Treasure Coast Bahamian Connection Organizat	tion, Inc
<u></u>	(Firm/ Company)
1415 SW Abacus Ave	
	(Address)
Port St. Lucie, Florida 34953	
	(City/ State and Zip Code)
wizergeneration@gmail.com	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	olease call:
Andy T Williams	786 389-3930
(Name of Contact P	erson) (Area Code) (Daytime Telephone Numbe
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Sta	e & □\$43.75 Filing Fee & □\$52.50 Filing Fee atus Certified Copy Certificate of Status (Additional copy is Certified Copy
	enclosed) (Additional Copy is Enclosed)

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	Article	tes of Amendment	
	Article	to es of Incorporation	
		of	
Treasure Coast Bahan (Name of Corporation as currently filed with the	Nían Florida I	Connection Organization, In	<u>c</u> 9: 3
N 2300009	_		
		ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statute	tes, this Florida Not For Profit Corporation adopts the follo	wing
A. If amending name, enter the new name of the	corporat	ition:	
	NIA	A The	new
name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	'corpora	HThe ation" or "incorporated" or the abbreviation "Corp." or "It	<i>ıc.</i> ''
B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AD</u>	l <u>e:</u> DRESS	NIA	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>() X</u> )	NA	
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered			
	<u>i unice a</u>	10	
Name of New Registered Agent:	N	<u> H</u>	
- New Registered Office Address;		(Florida street address)	
<u>A W KERMULU AJJUA AUULAS</u> .	NI	A Florida	
-	•	(City) (Zip Code)	

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam 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)

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John I</u> <u>V Mike J</u> SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>V</u>	Sherry Barr McGahee	148 NE BRACKEN ROAD PORT ST. LUCIE, FL 34983
2) Change Add	<u>V</u>	Sharmaine Clarke	2349 SE Addison St. Port St. Lucic, Florida 34984
	<u>D</u>	Karen Velilla	2565 SW ABNEY STREET PORT ST. LUCIE, FL 34953
4) Change Add	<u>))</u>	Kendis F. Archer	1506 Barcelona Ave Fort Pierce, Florida 34946
Remove			
5) Change Add	<u>S</u>	Viven Banks	435 SW Namoit Place Port St Lucie, Florida 34953
Remove			
6) Change Add			
Remove			
12 16 dia add		tistus anton shanga(s) haray	

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

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· · · · · · · · · · · · · · · · · · ·				<u></u>
	07/16/2024			
The date of each amendment(s) addate this document was signed.	doption:			_, if other than the
uae inis document was signed.	Noticito an			
Effective date <u>if applicable</u> :	07/16/2024 (no more than 90 days		·	
	(no more than 90 days	ajier amenament file dai	(ť)	
<u>Note:</u> If the date inserted in this blo document's effective date on the Do		ble statutory filing requir	ements, this date will not	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
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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	07/16/2024	
Signature	e <u>ducty</u> <u>T</u> - <u><u>Ulice</u> <u>President</u> (By the chaiman or vice chaiman of the board, president or other officer-if di have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)</u>	rectors lee, or

Andy T Williams

(Typed or printed name of person signing)

President

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(Title of person signing)