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COVER LETTER

TO: Amendment Section Division of Corporations

FLORIDA CIVIL RIGHTS ALLIANCE, INC. NAME OF CORPORATION:	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JOHN REID	
(Name of Contact Person)	
FLORIDA CIVIL RIGHTS ALLIANCE, INC.	
(Firm/ Company)	
POST OFFICE BOX 6272	
(Address)	
TALLAHASSEE, FL 32314	
(City/ State and Zip Code)	
LEGAL@FCRALLIANCE.ORG	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
JOHN REID 850 591-4320	
(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	
Mailing Address Street Address	

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

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

Articles of Amendment to Articles of Incorporation

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		of	ļ			
FLORIDA CIVIL RIGHTS ALLIANCE, INC.					أعوأ	
(Name of Corporation as currently filed with the	Florida	Dept. of State)	2624	101-122 E	1,2:45	
N23000010304			2024	IIII oo re	ATT DE	
(Docum	ent Num	ber of Corporation		15''- 22 P!'	1-21-5	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statu	tes, this <i>Florida Ne</i>	ot For Profit Co	orporation add	opts the fol	lowing
A. If amending name, enter the new name of the	corpora	tion:				
N/A					77.	ie new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ation" or "incorpo	rated" or the al	bbreviation "C	Corp." or	Inc."
B. Enter new principal office address, if applical	hle	N/A			_	
(Principal office address MUST BE A STREET A		N/A		·,	7021	إموس
		N/A				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE I</u>	<u>30X</u>)	N/A			2 Fil	
		N/A		÷ .	. , ?	بکنی ۲۰
		N/A		· "	77 5	
D. If amending the registered agent and/or regist	tered off	ice address in Flor	rida, enter the	name of the		
new registered agent and/or the new registere	d office	address:				
Name of New Registered Agent:	N/A					
	N/A					
New Registered Office Address;		•	(Florida street ad	ddress)	• • • • • • • • • • • • • • • • • • • •	
	N/A			, Florida		
-		(Cin·)		, romaa (Zip Co	de)	

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.

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	PT John D V Mike John S SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) X Change Add	CCEO	AL LAWSON	400 N. ADAMS STREET TALLAHASSEE, FL 32301
Remove 2) <u>× Change</u> Add	VT	JOHN REID	P.O. BOX 6272 TALLAHASSEE, FL 32314
Remove Add Remove	<u>S</u>	PAMELA BAKER	400 N. ADAMS STREET TALLAHASSEE, FL 32301
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
ARTICLE III			
The specific purpose for SECTION A.	which this corpora	tion is organized is:	
	ampion civil right	s, promote equality, and advance justice thro	whout the diverse communities of
		as we work tirelessly to eradicate discrimina	

SECTION B.	
The Florida Civil Rights Alliance, Inc. is organized exclusively for charitable, religious, educational, and/or scientific	
purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal	
tax code.	
SECTION C.	
Upon dissolution of the Florida Civil Rights Alliance, Inc., assets shall be distributed for one or more exempt purposes	
within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax	
code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.	
The date of each amendment(s) adoption: N/A	1 1 h
Effective date if applicable:	
(no more than 90 days after amendment file date)	

document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

)	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 JULY 22, 2024
	Signature (By the chairman or vive chairman of the board, possident 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)
	ALFRED J. LAWSON, JR.
	(Typed or printed name of person signing)
	CHAIR/CHIEF EXECUTIVE OFFICER
	(Title of person signing)