N25403

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MLENSSEE FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

The Florida Council on Compulsive Gambling, 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:
David Griffin, Esq.
(Name of Contact Person)
The Florida Council on Compuslive Gambling, Inc.
(Firm/ Company)
121 E. 1st Street
(Address)
Sanford, FL 32771
(City/ State and Zip Code)
jkruse@gamblinghelp.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Kruse 407 865-6200
(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:
\$\square\$ \$\squa

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

ouncil on Compulsive Gambling,

(Name of Corporation	las currently filed with t			
Nas403			_	
(Досил	nent Number of Corporation	on (if known)		_
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida</i> .	Not For Profit Corporati	ion adopts the followi	ng
A. If amending name, enter the new name of the	e corporation;			
			The ne	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		vorated" or the abbrevia	tion "Corp." or "Inc.	1)
B. Enter new principal office address, if applica	ble:			
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)			_
				-
	 			_
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE)	<u></u>		<u></u>	
				— <u>)</u>
			78)	<u>_</u> = _
D. If amonding the vectoring are set and/or under	stand office address in T		£,	
 If amending the registered agent and/or registered agent and/or the new registered. 	ed office address:	orian, enter the name o	it the	- TP (**
Name of New Registered Agent:	David Gri	ffin Esa.		
Hante of the Register ou rigers.	121 E. 15		3 44	_t
·	141 0	(Florida street address)		_ `
New Registered Office Address:		·		
	San ford (City)	, Fk	orida <u>32771</u> Zip Code)	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F				
hereby accept the appointment as registered agen	t. I am familiar with and i	accept the obligations of	the position.	
	Mist.	LI willer	1	
-	Signature of New	Registered Agent, if chai	nging	_
		I:I		

Page 1 of 4

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 A_Add	<u>V</u> <u>N</u>	ohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Paul R. Ashe	249 Springside Rd
Add			Longwood, FL 32779
X Remove			
2) X Change	P	David Griffin, Esq.	121 E. 1st Street
Add			Sanford, FL 32771
Remove			
3) Change		Richard Fenton	670 Secret Lake Lane
Add			Apt 342
X Remove			Heathrow, FL 32746
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

C. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)								
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<u> </u>								
				.				

The date of each amend		, if other than the
date this document was s		
Effective date <u>if applica</u>	ible: July 26, 2017 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will not be e on the Department of State's records.	listed as the
Adoption of Amendmen	nt(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
Dated _	August 9, 2017	
Signature _	Want Dull.	
ħ	By the chairman or vice chairman of the board, president or other officer-if directors nave not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	David Griffin	
	(Typed or printed name of person signing) (Title of person signing)	