N27727

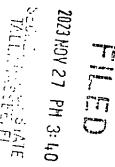
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COVER LETTER

TO: Amendment Section Division of Corporations

NATIONAL COANAME OF CORPORATION:	LITION OF 100 BLAC	K WOMEN,	INC., TAMPA BAY CHAPTER
N27727 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Adrianne Wilson			
	(Name of Contact Per	rson)	
National Coalition of 100 Black Women, INC., Tar	npa Bay Chapter		
	(Firm/ Company))	
7211 Peregrina Loop			
	(Address)		
Wesley Chapel, FL 33545			
	(City/ State and Zip C	Code)	
nc100bw.tampabay@gmail.com			
E-mail address: (to be us	sed for future annual repo	ort notificatio	n)
For further information concerning this matter, plea	se call:		
Adrianne Wilson	at	813	205-4723
(Name of Contact Pers		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	epartment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		eet Address endment Sect	ion

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 of

	01	
NATIONAL COALITION OF 100 BLACK WON	MEN, INC., TAMPA BAY CHAPTER	
Name of Corporation as currently filed with the	e Florida Dept. of State)	2023 HOY 27 DH
N27727		FILED 2023 HOY 27 PM 3: L
(Docum	nent Number of Corporation (if known)	TALLEY LL STOT
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Profi</i>	t Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	<u>e</u> .	The new re abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble: 7211 Peregrina Loop	
(Principal office address <u>MUST BE A STREET A</u>		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	
D. If amending the registered agent and/or reginew registered agent and/or the new register		the name of the
Name of New Registered Agent:	Wilson, Adrianne	
Take by the strength of the st	7211 Peregrina Loop	
<u>New Registered Office Address:</u>		vet address)
	Wesley Chapel	, Florida 33545
	(City)	(Zip Code)
New Registered Agent's Signature, if changing land thereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with and accept the obt	ligations of the position.
-	Adresse Wills	
	Signature of New Registered As	gent, 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: X Change X Remove X Add	PT John Do V Mike Jo SV Şally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	BOD	BERRY, BELINTHIA AUBRIENA	5901 LILAC LAKE DRIVE RIVERVIEW, FL 33578
Remove			
2) × Change Add	NC	BARBER, ANTONIA	5901 LILAC LAKE DRIVE RIVERVIEW, FL 33578
Remove 3) × Change Add Remove	BOD	LONDON, JANICE	5201 CUMBERLAND DRIVE TAMPA, FL 33617
4) × Change Add	<u>P</u>	WILSON, ADRIANNE, Dr.	7211 PEREGRINA LOOP WESLEY CHAPEL, FL 33545
Remove			
5) Change Add	<u>T</u>	LUCAS, AYANA, Dr.	17804 BLACKFORD BURN CT LUTZ, FL 33559
× Remove			
6) × Change Add	TVP	JONES, KELLY	3205 GRAND AVE APT 207
Remove			PINELLAS PARK, FL 33782
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
		* 317	3 6 4.
	•••		
	3/7-		- <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)

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Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change Add	NC	DAYMOND, ANDREA	3617 E DIANE ST TAMPA, FL 33610
x Remove			
2) Change Add	BOD	MARTIN, KENNESHIA	1315 OAKFIELD DR UNIT 3836
X Remove 3) X Change Add Remove	SVP	DAWSON, STACEY	BRANDON, FL 33509 3362 CEDAR CREST LOOP SPRING HILL, FL 34609
4) <u>×</u> Change Add	FVP	LENOX, ANGELIQUE	4121 MORELAND DRIVE VALRICO, FL 33596
Remove			
5) Change Add	BOD	VIVIAN KITCHEN	4802 NORTH ASHLAND DRIVE TAMPA, FL 33610
Remove			
6) Change Add	BOD	DORALEN MCCLINTON	1511 WEST LEMON STREET TAMPA, FL 33606
Remove			
E. <u>If amending or addin</u> (attach additional shee		cles, enter change(s) here: (Be specific)	

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.

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Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	<u>T</u>	BURRISS, FAITH	5012 CHATHAM GATE DRIVE RIVERVIEW, FL 33578
Remove			
2) Change Add	RCS	STEWART, SHAKITA	1635 CROSSRIDGE DRIVE BRANDON, FL 33510
Remove 3) Remove 4 Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	
			
			·
			

Note: If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Effective date if applicable: (no more than 90 days after amendment fi	le date)
The date of each amendment(s) adoption: date this document was signed.	

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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.

Dated	10/27/2023
Signature	Adriane (1). Il
(By	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Adrianne Wilson
	(Typed or printed name of person signing)

(Title of person signing)