N35084

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

2018 JAN -5 AM 100 0 TO: Amendment Section Division of Corporations NAME OF CORPORATION: Uptown Neighborhoods N35084 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) Dartmoor St. N. historicuptown @gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Krists Anderse at 813-390-3582

(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: □\$52,50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

. Articles	s of Amenament	
Articles	to of Incorporation	
Uptown Neighbort (Name of Corporation as current	of	2018 JAN -5 AH 10
(Document Number	U 8 7 er of Corporation (if known)	
(Document Numbe	i of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation	r adopts the following
A. If amending name, enter the new name of the corporation	<u>on:</u>	The new
name must he distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	826 Dartmoo St Petersburg	<u>r Street</u> N FL 3370 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	826 Dartmoor SI. Pete FL 33701	- St.N
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		<u>the</u>
Name of New Registered Agent: K(1)	Sty Audersen 6 Dartmox St, (Florida street address)	W .
New Registered Office Address: St	Petersbuz Flor	ida <u>3370 /</u> ip Code)
New Registered Agent's Signature, if changing Registered A large land land land land land land land land		re position.
Siz	gnature of New Registered Agent, if chang	ging

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		<u>Doe</u> Jone <u>s</u> Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	Pres.	Anthony Ortiz	PO BOX 1184 St Pete Fz 33731-1184
2) Change Add	<u>vP</u>	Ben Gelston	PO BOX 1184 St Pete Flo
Remove 3) Change Add Remove	Treas.	Sonja Cziesla	33731-1184 PO BOX 1184 St Petc FZ 33731-1184
4) Change Add Remove	<u>Sec</u> .	Erika Stanley	Po Box 1184 St Petc FL 33731-1184
5) Change Add Remove	Pres	Kristy Andresen	826 Dartmoorst. N 5t Petersburg Fr 33701
6) Change Add Remove	Treas.	Vardi Carmella Page 2 of 4	625 Grove St.N St Peterssury FL 33781-

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

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: Januar 1, 2018	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
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 Nec. 30, 2017	
Signature Krist and	
(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)	
Kisty Andersen (Typed or printed name of person signing)	
Interim President, HUNA	

(Title of person signing)