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S. PRATHE:

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Safety Shelter o	f St. Johns County,	Inc. DBA I	Betty Grif	fin Center	
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are	submitted for filing	i.			
Please return all correspondence concerning this	matter to the following	ing:			
Kelly Franklin					
	(Name of Cont	act Person	)	· <u> </u>	
Safety Shelter of St. Johns County, Inc. DBA Be	tty Griffin Center				
	(Firm/ Co	mpany)	,		
2450 Old Moultrie Rd., Ste. 202					
	(Addre	ess)			
St. Augustine, FL 32086					
	(City/ State and	d Zip Code	)		
KellyF@bettygriffincenter.org					
E-mail address: (to be	used for future annu	ial report n	otificatio	n)	
For further information concerning this matter, pl	lease call:				
Christie Coleman		904 at		808-8544 x 205	
(Name of Contact Pe	rson)			(Daytime Telephone Number)	
Enclosed is a check for the following amount made	de payable to the Flo	orida Depa	rtment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State		ру	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amendi Division	Address ment Sect n of Corpo entre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Safety Shelter of St. Johns County, Inc. DBA Betty Griffin Center (Name of Corporation as currently filed with the Florida Dept. of State) N39945 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida \_\_ (City) (Zip Code) 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.

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)

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	V Mik	<u>n Doe</u> e Jones y S <u>mith</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add	Р	Lisa Payne	2450 Old Moultrie, Rd. Ste. 202	
A Remove			St. Augustine, FL 32086	
2) Change Add	<u>T</u>	Melissa Angulo	2450 Old Moultrie, Rd. Stc. 202	
Remove Change Add Remove	<u>s</u>	Tim Çonlan	St. Augustine, FL 32086  2450 Old Moultrie, Rd.  Ste. 202  St. Augustine, FL 32086	
4) A Change Add	<u>P</u>	Jayne Evans	2450 Old Moultrie Rd. Ste. 202	
Remove			St. Augustine, FL 32086	
5) Change Add	VP	Michelle Wilcox	2450 Old Moultrie Rd. Ste. 202	
Remove			St. Augustine, FL 32086	
6) Change Add	<u>T</u>	Lori Brandel	2450 Old Moultrie Rd. Ste, 202	
Remove			St. Augustine, FL 32086	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
1) Remove Chairman,	Lisa Payne, as h	er term has ended with our Board, as of Ju	ine 30, 2022	
2) Remove Treasurer, Melissa Angulo, as she is no longer our Treasurer, as of June 30, 2022				
3) Remove Secretary, Tim Conlan, as he is no longer our Secretary, as of June 30, 2022				
4) Change Vice Chair, Janye Evans, to Chairman, because as of July 1, 2022, she is our Board Chair				
5) Add Michelle Wile	ov. as Vice Chair	hagairea as of July 1, 2022, the is our Re	oard Vice Chair	

7) Add Carolyn Mudgette, as 3	Secretary, because as of July 1, 2022, she is our Board Secretary. the	e address is:
2450 Old Moultrie Rd., Ste. 20	02, St. Augustine, FL 32086	
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The date of each amendment date this document was signed	(s) adoption: June 27, 2022	, if other than the
Effective date <u>if applicable</u> :	July 1, 2022	
<u></u>	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	ere adopted by the members and the number of votes east for the an	nendment(s)

	There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.
	Dated _	08/30/2022
	ì	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)
		Kelly Franklin
		(Typed or printed name of person signing)
		Chief Executive Officer
		(Title of person signing)

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