## 1143460

(Re	questor's Name)	
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(6)	Chan Wind Diagram	40
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Voices fo	r Florida Ke	eys Children, Inc.		
DOCUMENT NUMBER: N43460				
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matte	er to the following:			
Tom Woods				
	(Name of Contact Person	1)		
Tom Woods, PA				
	(Firm/ Company)			
116 Porto Salvo Drive				
	(Address)			
Islamorada, FL 33036				
(City/ State and Zip Code)				
tom@tomwoodsla	aw.com			
E-mail address: (to be used	for future annual report	notification)		
For further information concerning this matter, please	call:			
Tom Woods	at (305	, 664.2200		
(Name of Contact Person)		ode & Daytime Telephone Number)		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

## Articles of Amendment to Articles of Incorporation

FILED

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## Voices for Florida Keys Children, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

CREATIANY OF STATE.

1943460			
(Docum	ent Number of Corpora	tion (if known)	
Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation		Florida Not For Profit Corporation ac	dopts the following
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain th "Company" or "Co." may not be used in th		or "incorporated" or the abbreviation '	'Corp." or "Inc."
B. Enter new principal office address, if a (Principal office address MUST BE A STR)			<del></del>
			***
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF			
(			
D. If amending the registered agent and/o	er registered office add	lress in Florids, enter the name of the	
new registered agent and/or the new re			•
Name of New Registered Agent:			
trume of the w neg silered rigem.			
_	(Florid	la street address)	
New Registered Office Address:	(1 101 100	a un et routa essy	
		, Florida	
	(City)		Zip Code)
New Registered Agent's Signature, if chan	naina Rogistored Agen	<b>t</b> •	
hereby accept the appointment as registere			osition.
	Signature of New Regist	tered 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	PT John Do Y Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	TD	Childree, Christine	97652 Overseas Hwy. Apt. T12
Add X Remove			Key Largo, FL 33036
2) Change	PD	Pierog, Debbie	181 Venetian Drive
X Add			Islamorada, FL 33036
3) Change	P	Russell, Pauline	240 Treasure Harbor Dr.
Add X Remove			Islamorada, FL 33036
4) Change	PD	Woods, Tom	116 Porto Salvo Dr.
X Add			Islamorada, FL 33036
Remove  5) Change	<u>P</u>	Lasseter, Kathy	417 Laguna Ave.
Add			Key Largo, FL 33037
Remove  6) Change	<u>T</u>	Singer, Mary Lee	101 Gulfview Drive Unit 201
X_Add			Islamorada, FL 33036
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Add TD Hopman, Leisa 50 N. Bounty Lane, Key Largo, FL 33037
Add VPD Bridges, Jack, 13 Park Drive, Key Largo, FL 33037
Remove VP, Woods, Tom, 116 Porto Salvo Drive, Islamorada FL 33036
Add D Lassiter, Kathy, 417 Laguna Ave., Key Largo, FL 33037
Add D Russell, Pauline, 240 Treasure Harbor Drive, Islamorada, FL 33036

The date	date of each amend this document was s	ment(s) adoption: 4 March, 2014	, if other than the
	Effective date if applicable: 4 March 2014		
		(no more than 90 days after amendment file date)	<del></del>
Ado	option of Amendme	nt(s) (CHECK ONE)	
	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 memb adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.  10/21/2014	
	Dated _		
	Signature	/s/ Tom Woods	
	(1 1	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)	<del></del>
	Ton	n Woods	
		(Typed or printed name of person signing)	
	Co-	President	
		(Title of person signing)	