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S. RODLKIO

AUG 1 1 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	of the Crow	<i>(</i> /
DOCUMENT NUMBER:	279	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Pauline Crumpton		
,	(Name of Contact Person	1)
	(Firm/ Company)	
1508 ECKles Drive		
1508 Eckles Drive	(Address)	
ТАпра, FL 33612		
, ,	(City/ State and Zip Cod	e)
PC 1368 @ AOL. E-mail address: (to be use	COM d for future annual report	notification)
For further information concerning this matter, please		,
PAULINE Crumpton (Name of Contact Person	at	813-295-3285
(Name of Contact Person	ı) (At	ea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	•	artment 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		Address
Amendment Section		Iment Section
Division of Corporations P.O. Box 6327		on of Corporations entre of Tallahassee
Tallahassee, FL 32314		N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LAdies of Corporation as currently filed with the Florid	Crown	
(Document Nu	7279 Imber of Corporation (if known)	
(Bocument 140	milet of corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the	ne following
A. If amending name, enter the new name of the corpo	ration:	
	- NA-	The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u> </u>	
C. Enter new mailing address, if applicable:	- NA -	26?3
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		(.
		نــَ،
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		i. 6 c.
	4.4	ņ
Name of New Registered Agent:	- NA -	
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agent. I an		•
	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 Mike	i Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u> </u>	Rose ANN Froberg	GIUT SOAFING AVE TEMPLE TELTACE, FL 33617
2) Change _X_ Add	<u> </u>	PAUL'NE Crumpton	1508 ECKles Drive
Remove 3) Remove Change Add Remove	<u>D</u>	SANdia HANNA	3215 PACK Green Drive
4) Change Add Remove	<u>.D</u>	Augela Guagliardo	3323 W. PACKHAND Prive
5) Change Add Remove	_ <i>D</i> _	Patricia Gorzka	345 Bayshore Bluck Unit 314 Tampa, FL 33606
6) Change Add Remove	_D	KAthy MAddeni	3306 W. SAN JUAN ST JAMPA, F.L. 33629
E. If amending or ad (attach additional s		Articles, enter change(s) here: -). (Be specific)	
		-NA-	
	,		
	 		

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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
7)ChangeAddX Remove	_\$_	Sally Erwin	2902 Pointer Place Septuer, Fl 33584
7) Change Add X Remove	_3	Fern Mc Cubbins	4339 Cheval Bird Lutz, FL 33558
q) Change Add Remove	D	KACCN WINEKI	3830 Gulf Blyd #PH8 St. Pete Brach, EL 33706
/6) Change Add	_\$	Ruchel Dolton	HUS Salterator Blut
Remove 5) Change Add		 -	
Remove 6) Change Add			
	adding additional /	Articles, enter change(s) here: ·). (Be specific)	
		- NA-	

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The date of each amendment(s) adoption:	1/1/12	6	2023		if other than the
date this document was signed.	JUNE		<u> </u>		, if other than the
Effective date if applicable:	JUME	19,	2023		
(no mo	re than 90 days aft	er aména	lment file date)		
Note: If the date inserted in this block does not a document's effective date on the Department of S		statutory	filing requiremen	ts, this date will no	ot be listed as the
Adoption of Amendment(s) (CH)	CK ONE)				
The amendment(s) was/were adopted by the was/were sufficient for approval.	members and the r	number o	f votes cast for the	amendment(s)	

Dated	JUNE 26, 2023
Signatu	ire Cha I Director
-	(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)
	Celin FerNANdez
	(Typed or printed name of person signing)

(Title of person signing)