# 146847

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(Ad	ldress)	
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: FLORIDA STATE ČRB	CHAPTER, INC
DOCUMENT NUMBER: N46874	
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fi	ollowing:
HONORA S. GIUMENTA	
(Name o	f Contact Person)
FLORIDA STATE REBI CHAPTER, INC	
(Fire	n/ Company)
4871 NW PALM COAST PARKWAY, #3	
(	Address)
PALM COAST, FL 32137	
(City/ Sta	ite and Zip Code)
Honora@ExitRealtyFirstChoice.com	
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
HONORA S. GIUMENTA	(386) 246-3161, ext.11
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to t	he Florida Department of State:
	ed Copy Certificate of Status onal copy is Certified Copy

# Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

# **Street Address**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of

### FLORIDA STATE CRB CHAPTER, INC

# (Name of Corporation as currently filed with the Florida Dept. of State) N46847 (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: FLORIDA STATE REBI CHAPTER, INC The new 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:				
(attach additional sheets, if necessary). (Be specific)				
N/A				
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<del></del>				

	1-28-16	
	e date of each amendment(s) adoption:  c this document was signed.	, if other than the
17.00	. 3-9-16	
EH	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records.	be listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
Ø	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.	
	1-28-16 Dated	
	Signature Wonara S. Gumenta	_
	(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)	
	HONORA S. GIUMENTA	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	