Nyqya

(Re	equestor's Name)	<u> </u>
(Ad	ddress)	
(Ad	idress)	
(Cil	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of \$	Status
Special Instructions to	Filing Officer:	

Office Use Only

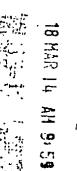


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And

R. WHITE NAR 1 5 2018



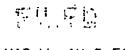
COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Connections Job	Development Corporation
DOCUMENT NUMBER: N49429	
The enclosed Articles of Amendment and fee are submitted for filing	g.
Please return all correspondence concerning this matter to the follow	ving:
Ann M. Wirkinson	
(Name of Qor	ntact Person)
Connections Job Development	Curporation
(Firm√ Co	ompany)
5841 Main St.	
(Adar	ress)
New Port Richey, FL 34652 (City/State an	
(City/ State an	nd Zip Code)
awilkins on @ cidfl. org	
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this matter, please call:	
Ann M. Wilkinson	at (727) 849-4724
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the F	orida Department of State:
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Certificate of Status Certified Co (Additional enclosed)	py Certificate of Status
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



18 MAR 14 AH 9:59

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Connections Job Development	lylfiled with the Florida Dept. of State)
(Name of Corporation as Current	typined with the Florida Dept. of State)
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes imendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
NIA	The new
name must be distinguishable and contain the word "corporati" "Company" or "Co," may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	VIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
	1
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ad 	
	
Name of New Registered Agent: NIA	
	(Florida street address)
New Registered Office Address:	(1 to the siver duaress)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	
Sig	nature of New Registered Agent, if changing
	i e

Page 1 of 4

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.

, and borier, and treme		, 5	
Example: X Change X Remove X Add	<u>V</u> <u>Mike</u>	Doe c Jones / Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	T	Jason Zandecki	Po Box 1260 New Port Richey FL
Remove			34656
2) X Change Add	3	Sheila Krautner	PO BOX 1260 New Port Richy, FL 34656
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s	l] here:
E. If amending or adding additional Articles, enter change(s) (attach additional sheets, if necessary). (Be specific)	
. r . A	
NIA	
	<u> </u>
	1
	
	

The date of each amendment	(s) adoption: Fek	rvary 2	· F, 2018	, if other than the
late this document was signed.		1		
Effective date <u>if applicable</u> :	February (no more th	an 00 days ution	comandment (ile data)	
	(no more n	un 90 auys ajier	amenament jue aate)	
Note: If the date inserted in the document's effective date on the			stutory filing requirements, the	his date will not be listed as the
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/w was/were sufficient for ap	ere adopted by the men proval.	bers and the nur	nber of votes east for the am	endment(s)
☐ There are no members or adopted by the board of d	lirectors.	e on the amendn	nent(s). The amendment(s) v	was/were
Dated	2/18/18			
Signature		Kin		
have n		incorporator - if	-president or other officer-if in the hands of a receiver, tr ry)	
		lasu Co		
	(Ty	ped or printed n	ame of person signing)	
		BOALD	PRESIDENT	
		(Title of	person signing)	