N93000000058

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
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OF STATE REORATIONS

MAY 3 1 2013

T. BROWN

COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Health Occu	pations Studer	nts of America Florida
DOCUMENT NUMBER: N93000000	058	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Sandralyn Rezac		
	(Name of Contact Person)
Florida HOSA, Inc.		
	(Firm/ Company)	
13570 NW 101st Drive 5	Suite 200	
	(Address)	
Alachua, FL 32615		
	(City/ State and Zip Code	2)
srezac@flhosa.or	g	
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please of	call:	
Lloyd DeVault	_{at (} 386	de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$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 Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



Florida Association Health Occupation Students of America, Inc.

(Name of Corporation as current			" ?
N93000000058	ny med with the Fig	ortua Dept. or State)	
(Documen	nt Number of Corpor	ration (if known)	
Pursuant to the provisions of section 617, amendment(s) to its Articles of Incorpora	1006, Florida Statute tion:	es, this Florida Not For Profit Corporation adopts the fo	llowin
A. If amending name, enter the new name, enter	ame of the corporat		The nev
name must be distinguishable and contain "Company" or "Co." may not be used in	n the word "corpora the name	ttion" or "incorporated" or the abbreviation "Corp." or	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		13570 NW 101st Drive Suite 200	
		Alachua, FL 32615	
C. Enter new mailing address, if applied (Mailing address) MAY BE A POST of the Mailing address of the Mailing address, if applied to the Mailing address of	OFFICE BOX) d/or registered offi	13570 NW 101st Drive Suite 200 Alachua, FL 32615 ce address in Florida, enter the name of the address:	
Name of New Registered Agent:	n/a		
	13570 NW	101st Drive Suite 200	
New Registered Office Address:		(Florida street address)	
	Alachua	, Florida 32615	
	(City)	(Zip Code)	
	ered agent. I am fa	miliar with and accept the obligations of the position.	
Sig	nature of New Regis	tered Agent, if changing	

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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		<u>n/a</u>	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
	•		
6) Change		_	
Add			
Remove			

(at	amending or adding additional Articletach additional sheets, if necessary).	(Be specific)
n/a	<u> </u>	
<u> </u>		
-		
	<u> </u>	
		
		

The date of each amendment(s) adoption:
Effective date if applicable: April 5 2013 (no more than 10 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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.
Dated 5/17/13
Signature kir salleth bukee
(By the chairwan 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)
other court appointed reduciny by that modelling)
Elizabeth Durkee
(Typed or printed name of person signing)
Co-Chairperson Florida HOSA, Inc.
(Title of berson signing)