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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	TITUTE FOR ELDERS AT UNIVERS	SITY OF CENTRAL FI	ORIDA, INC.	
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning t	his matter to the following:			
Clint Buczkowski				
	(Name of Contact	Person)		
	(Firm/ Compa	ny)		
C/O Jacqueline Ulacia 12716 Pegasus Drive	PO Box 161997			
	(Address)			TAN E
Orlando, FL 32816-1997				
	(City/ State and Zi	p Code)		
info@lifeatucf.org				
E-mail address: (to	be used for future annual r	eport notificatio	n)	근품
For further information concerning this matte	r, please call:			[1]
Clint Buczkowski		407 at	687-9508	
(Name of Contac			(Daytime Teleph	one Number)
Enclosed is a check for the following amount	made payable to the Florid	a Department of	State:	
□ \$35 Filing Fee ■\$43.75 Filing Certificate of		Certif y is Certif (Addi	0 Filing Fee ficate of Status fied Copy fitional Copy is fised)	
Mailing Address Amendment Section	-	Street Address Amendment Sect	ion	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

the following
The new
" or "Inc."
TALLI TALLI
6-1997
n.

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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Jack McGuire	3064 Temple Trail Winter Park, FL 32789
Remove 2) Change Add	<u>D</u>	Diane Wink	14531 Gainsborough Dr V Collando, FL 32826
x Remove 3) Change Add _x Remove	D	Marcella Kysilka	2837 Lake Baldwin Ln Roman Rom
4) _x Change Add	<u>P</u>	Richard Sloane	2651 Peony Drive Oviedo, FL 32766
Remove  5) Change Add	<u>v</u>	Michael Agor	8767 The Esplanade #30 Ortando, FL 32836
Remove  6) X Change Add	<u>s</u>	Maureen Cortese .	I East Yale Street Orlando, FL 32804
E. If amending or add (attach additional sh		rticles, enter change(s) bere:  (Be specific)	

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:

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Example:  X Change X Remove X Add	PT         John I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	D	Beth Barnes	4732 Warrington Drive Orlando, FL 32826
Remove  2) Change Add	<u>T</u>	Clint Buczkowski .	482 Devon Place Lake Mary, FL 32746
Remove 3) Change X Add Remove	<u>D</u>	Marcia Enos	664 Scarlet Oak Circle Unit 116 Altamonte Springs, FL 32701
4) Change Add	D	Edward Schons	1587 Carrington Avenue Winter Springs. FL 32708 7 (2)
Remove  5) Change Add	D	Linda Thompson	603 Hidden Pine Ct Apopka, FL 32712
Remove 6) Change Add	<u>D</u>	R. Todd Bowers	1410 Sweetbriar Road Orlando, FL 32806
E. If amending or add (attach additional sho		ticles, enter change(s) here: (Be specific)	

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	PT John De V Mike Jo SV Sally S	ones		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change Add	<u>D</u>	William Myers	1948 Westbourne Dr. Oviedo, FL 32765	
x Remove				
2) Change Add				
Remove 3) Remove Add Remove				2023 HAY 23
4) Change Add	<del></del>			2 PH
Remove  5) Change Add			71 <del></del>	: 00
Remove 6) Change Add				
Remove				
E. If amending or additional she		icles, enter change(s) here: (Be specific)		

May 1, 2023  (no more than 90 days after amendment file days)	
The date of each amendment(s) adoption: May 1, 2023 late this document was signed.	, if other than the
	ALE 00
	AY 22 LAHAS
	2023 MAY 22 FM 1: 00 SECREDADE STATE THE AHAMSEE, FL
	<del></del>

A Committee of the Comm

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

	There are no memi adopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
	Dated	May 10, 2023
		Clint Buakowski
	(	(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)
		Clint Buczkowski
		(Typed or printed name of person signing)
		Treasurer
		(Title of person signing)

SECKLIAN OF STATE
TALLAHASSEE, FL

2023 HAY 22 PH 1: 00