N9300000126

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Cassial Instructions to Cities Officer
Special Instructions to Filing Officer:
1,000
unils

Office Use Only



800420520868

12/18/23--01029--012 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

The Sanibel NAME OF CORPORATION:	I-Captiva Audubon Socio	ety, Inc.		
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	e are submitted for filing			
Please return all correspondence concerning	this matter to the followi	ing:		
Deborah Ann Griffith				
	(Name of Cont	act Person)		
San-Cap Audubon				
	(Firm/ Cor	npany)		
2668 Coconut Drive				
	(Addre	ess)		
Sanibel, FL 33957				
	(City/ State and	l Zip Code)	
san.capaudubon@gmail.com				
E-mail address: (t	o be used for future annu	ial report n	otificatio	n)
For further information concerning this matter	er, please call;			
Debi Griffith		281 at		413-9542
(Name of Contact	et Person)		a Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	t made payable to the Flo	orida Depar	tment of	State:
\$35 Filing Fee \$43.75 Filing Certificate of	g Fee & S43.75 Filing f Status Certified Cop (Additional of enclosed)	ру	Certif Certif	0 Filing Fee Teate of Status Ted Copy Ttional Copy is Tosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Division	nent Sect	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Sanibel-Captiva Audubon Society, Inc.

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	
N930000	00126	
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the	ne following
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp.	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS)	
•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
	: T	23 DEC 9 35.9
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		9 PH 1: 46
	_	,
Name of New Registered Agent:	N/A	<u> </u>
New Registered Office Address:	(Florida street address)	·
	Florida	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: un familiar with and accept the obligations of the position	·.
N/	A	
	A Signature of New Registered Agent, if changing	

The state of the s

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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change Add	<u>P</u>	Phyllis Gresham	1020 Cellana Court Fort Myers, FL 33908
x Remove			
2) Change Add	<u>P</u>	Adam Sauerland	701 Astarias Circle Fort Myers, FL 33919
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			
	·		

			•	
· · · · · · · · · · · · · · · · · · ·				
···				
				
				
				
		-		
				·····
		- 	·	
				
		····		
	. /			
The date of each amendment(s) adoption: _ date this document was signed.	N/A			, if other than the
Effective date if applicable:				
(no	more than 90 days afte	er amendment file date)	·	•
Note: If the date inserted in this block does no document's effective date on the Department or	ot meet the applicable s of State's records.	statutory filing requiren	nents, this date will not	be listed as the

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)

Adoption of Amendment(s)

	December 9, 2023
Dated	December 9, 2023
Signature	Debout a. Suffit
	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)
	Deborah A. Griffith
	(Typed or printed name of person signing)
	Treasurer, Admin. Secretary
	(Title of person signing)