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## COVER LETTER

TO: Amendment Section Division of Corporations

Black Busin	ness Capital Financi	ng Corporation		
N93000000616				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fe	e are submitted for t	îling.		
Please return all correspondence concerning	this matter to the fo	llowing:		
Veronica Anderson, Esquire				
	(Name of	Contact Person)	-	
Anderson and Associates, P.A.				
	(Firm	/ Company)		
225 N. French Avenue				
	(4	Address)		
Orlando, Florida 32771				
	(City/ Stat	e and Zip Code	)	
ddingle@bbif.com				
E-mail address: (t	to be used for future	annual report n	otification	)
For further information concerning this matte	er, please call:			
Veronica Anderson		407 at		843-9901
(Name of Conta	ct Person)		a Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoun	t made payable to th	ie Florida Depai	tinent of	State:
■ \$35 Filing Fee □\$43.75 Filing Certificate o	f Status Certifie	d Copy onal copy is	Cenifi Cenifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		Street A	address nent Secti	OB

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

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.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (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:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  Senford  1. Senf	Black Business Capital Financing Corporation		
(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:  Black Business Community Development Corporation  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.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address if applicable: (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:  Name of New Registered Agent:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)	(Name of Corporation as currently filed with the F	lorida Dept. of State)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the followin amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  Black Business Community Development Corporation  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.  B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  N/A  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:  Name of New Registered Agent:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)	N93000000616		
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Black Business Community Development Corporation  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.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (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:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  Seeferd  32771	Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Pr	ofit Corporation adopts the following
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.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  Septend.	A. If amending name, enter the new name of the c	orporation:	
"Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (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:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  Seaford  13771	Black Business Community Development Corporatio	n	The new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (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:    Name of New Registered Agent	name must be distinguishable and contain the word " "Company" or "Co." may not be used in the name.	corporation" or "incorporated" of	r the abbreviation "Corp." or "Inc."
C. Enter new mailing address, if applicable: (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:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)  New Registered Office Address:	B. Enter new principal office address, if applicable	<u>e:</u>	
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:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)  New Registered Office Address:	(Principal office address <u>MUST BE A STREET AD</u>	DRESS )	
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:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)  New Registered Office Address:			
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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:  Anderson and Associates, P.A.  225 N. French Avenue  (Florida street address)  New Registered Office Address:	C. Enter new mailing address, if applicable:	N/A	
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  Senford 32771	(Mailing address MAY BE A POST OFFICE BO	<u></u>	
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  Senford 32771			
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  Senford 32771			
Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  New Registered Office Address:  Senford 32771		and office address in Playida ant	ar the name of the
Name of New Registered Agent:  225 N. French Avenue  (Florida street address)  New Registered Office Address:	new registered agent and/or the new registered	office address:	e) the name of the
225 N. French Avenue  (Florida street address)  New Registered Office Address:			
(Florida street address)  New Registered Office Address:	<del></del>	25 N. French Avenue	
Sonford 32771	_		street address)
Sanford 32771	New Registered Office Address:		
, Horida	S	anford	, Florida
(City) (Zip Code)	<del>-</del>	(City)	
	I hereby accept the appointment as registered agent.	I any familiar with and accept the	obligations of the position.

Page 1 of 4

Signature of New Registered Agend 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	$\overline{\underline{\mathbf{V}}}$ $\underline{\underline{\mathbf{M}}}$	ohn Doe like Jones ally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>D</u>	Kimberly Robinson	301 E. Pine St., Suite 175 Orlando, FL 32801
Remove			<del></del>
2) Change Add	D	Fozia Andarge	301 E. Pine St., Suite 175 Orlando, FL 32801
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove Page 2 of 4  E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
Amending Article III - Po	wers, Objec	ets and Purposes - the following is the entire articles	as amended:
"The purpose of this Corp	oration is to	assist with the development of African American,	small, minority and woman-owned
businesses regardless of ra	ace, ethnicit	y and gender. This corporation shall also facilitate,	develop and re-develop
economically depressed co	ommunities	through commercial real estate and residential proj	ects. Whenever there is an
opportunity to develop aff	ordable hou	ising, this corporation shall also provide affordable	housing to persons who have

	ome, or moderate income within a designated area, which may include a municipality,	
a county, or more than one municip	pality or county and maintains, through a minimum of one-third representation on the	
Corporation's governing board, acc	countability to housing program beneficiaries and residents of the designated area."	
<del></del>		
-		
	Page 3 of 4	
The date of each amendment(s) as date this document was signed.	doption:, if other the	han the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as expartment of State's records.	the
Adoption of Amendment(s)	(CHECK_ONE)	
The amendment(s) was/were as was/were sufficient for approx.	dopted by the members and the number of votes cast for the amendment(s) al.	

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 $\frac{3/13/2020}{}$
Signature Prosch  (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)
Susan Brosch
(Typed or printed name of person signing)
Secretary
(Title of person signing)