## N930000002275

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATI            |   | NATIONAL ORGA  | NIZATI    | ON FO              | R WOMEN, INC  |   |
|------------------------------|---|--|-----------|--------------------|---|---|
|                              | N93000002275                                |  |           |                    |   |   |
| DOCUMENT NUMBER:             |   |  | · · ·     |                    |   |   |
| The enclosed Articles of An  | nendment and fee are sub                    | omitted for filing.  |           |                    |   |   |
| Please return all correspond | ence concerning this mat                    | ter to the following:  |           |                    |   |   |
| Kim Porteous                 |   |  |           |                    |   |   |
|                              |   | (Name of Contact I   | Person)   |                    |   | _ |
| FL0000 FLORIDA NATIO         | NAL ORGANIZATION                            | FOR WOMEN, INC   | ••        |                    |   |   |
|                              |   | (Firm/ Compar  | ny)       |                    |   |   |
| 6616 Crenshaw Drive          |   |  |           |                    |   |   |
|                              |   | (Address)  |           |                    | · · · · · · · · · · · · · · · · · · ·                                 |   |
| Orlando, FL 32835            |   |  |           |                    |   |   |
|                              | •     | (City/ State and Zip   | Code)     |                    |   |   |
| kim4flnow@gmail.com          |   |  |           |                    |   |   |
| F                            | E-mail address: (to be use                  | d for future annual re   | eport not | ification          | 1)  |   |
| For further information con- | cerning this matter, pleas                  | e call:  |           |                    |   |   |
| Kim Porteous                 |   | a  | 706       |                    | 669-8192  |   |
|                              | (Name of Contact Person                     |  |           | Code)              | (Daytime Telephone Number   | ) |
| Enclosed is a check for the  | following amount made p                     | ayable to the Florida  | Departi   | nent of            | State:  |   |
| ☐ \$35 Filing Fee            | ■\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee<br>Certified Copy<br>(Additional copy<br>enclosed) |           | Certifi<br>Certifi | O Filing Fee<br>icate of Status<br>ied Copy<br>tional Copy is<br>sed) |   |
| Mailing Address              |   |  | treet Ad  |                    | · ·   |   |

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 to Articles of Incorporation of

FL0000 FLORIDA NATIONAL ORGANIZATION FOR WOMEN, INC

| (Name of Corporation as currently filed with the Florida D<br>N93000002275                                     | ept. of State)               |  |
|--|------------------------------|--|
| (Document Number   | er of Corporation (if known  | n)   |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | s, this Florida Not For Pro  | ofit Corporation adopts the following  |
| A. If amending name, enter the new name of the corporati   | on:                          |  |
|  |                              | The new  |
| name must be distinguishable and contain the word "corporat<br>"Company" or "Co." may not be used in the name. | ion" or "incorporated" or    | the abbreviation "Corp." or "Inc."   |
| B. Enter new principal office address, if applicable:  |                              |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  |                              | Z623   |
|  |                              |  |
| C. Enter new mailing address, if applicable:   |                              |  |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )   |                              | The same of the sa |
|  |                              | &  |
|  |                              | 56   |
| D. If amending the registered agent and/or registered office   |                              | er the name of the   |
| new registered agent and/or the new registered office a  | ddress:                      |  |
| Name of New Registered Agent:  | <del></del>                  |  |
|  | (Florida                     | street address)  |
| New Registered Office Address:   |                              |  |
|  |                              | , Florida  |
|  | (City)                       | (Zip Code)   |
| New Registered Agent's Signature, if changing Registered   |                              |  |
| I hereby accept the appointment as registered agent. I am fan  | niliar with and accept the c | obligations of the position.   |
|  |                              |  |
| Sig  | gnature of New Registered    | Agent, 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                            | PT         John Do           V         Mike Jo           SV         Sally Sr | <u>ones</u>                                   |   |
|--|--|---|---|
| Type of Action<br>(Check One)                                | Title  | <u>Name</u>                                   | <u>Addres</u> s                               |
| 1) Change<br>Add   | VP   | Cvnthia Harris                                | 12 Channing Avenue<br>Orlando, FL 32811       |
| Remove 2) Change Add   | Treas  | Elaine Togneri                                | PO Box 1281<br>New Port Richev, FL 34656      |
| X Remove 3) Change X Add Remove                              | Treas  | Tanja Vidovic                                 | 2437 Navarz Avenue<br>Safety Harbor, FL 34695 |
| 4) Change<br>× Add   | Sec  | Lakev Love                                    | 1511 Melvin Street Tallahassee FL 32301       |
| Remove 5) Change Add   | Sec  | Terry Sanders                                 | 181 Sand Dollar Road<br>Indialantic FL 32903  |
| <ul> <li>X Remove</li> <li>6) Change</li> <li>Add</li> </ul> |  |   |   |
| E. If amending or additional sheet                           |  | icles, enter change(s) here:<br>(Be specific) |   |
|  |  |   |   |
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| The date of each amendment  | t(s) adoption:   | , if other than the       |
| date this document was signed   | i.   |                           |
| Effective date if applicable:   | August 26, 2020  |                           |
| isnective date in applicable.   | (no more than 90 days after amendment file date)   |                           |
|   | ( · · · · · · · · · · · · · · · · · · ·  |                           |
| <b>Note:</b> If the date inserted in the document's effective date on t | his block does not meet the applicable statutory filing requirements, this date whe Department of State's records. | vill not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |                           |
| ☐ The amendment(s) was/w<br>was/were sufficient for ap                  | vere adopted by the members and the number of votes cast for the amendment<br>opproval.                            | (s)                       |

| 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 9 10 2020  |
| Signature Lim Portwood   |
| (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)   |
| Kim Porteous Limborteous Kim Porteous  |
| (Typed or printed name of person signing)  |
|  |
| President  |
|  |
| (Title of person signing)  |