11930000 2368

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	Idress)	•	
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



600279377666

11/23/15--01031--013 **35.00

SECRETARY OF STATE

15 NOV 23 AM 8: 14

W

TO: Amendment Section Division of Corporations	€
<u> </u>	
Iona House Corporatio NAME OF CORPORATION:	
N93000002368 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submit	tted for filing.
Please return all correspondence concerning this matter t	to the following:
Joseph Gallagher	
4)	Name of Contact Person)
Iona House Corporation	
4,	(Firm/ Company)
10290 Indiana Street	
	(Address)
Bonita Springs, Florida 34135	
(C	City/ State and Zip Code)
donovangavin@yahoo.com	
E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please cal	11:
Joseph Gallagher	239 785-8858
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payal	ble to the Florida Department of State:
	\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

to Articles of Incorporation of

Iona House Corporation			
(Name of Corporation N93000002368	as currenti	y filed with the Flor	ida Dept, of State)
(Docum	nent Number	r of Corporation (if kr	nown)
ursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	rida Statutes.	, this Florida Not Fo	r Profit Corporation adopts the following
. If amending name, enter the new name of the	e corporatio	<u>n;</u>	
I/A			The new
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name		on" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica Principal office address MUST BE A STREET A	ble:	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		N/A	
, G	-		
			· · · · · · · · · · · · · · · · · · ·
o. If amending the registered agent and/or regis			enter the name of the
new registered agent and/or the new register		<u>ldress:</u>	
Name of New Registered Agent:	N/A		
		(FI	orida street address)
New Registered Office Address:			N/A
	N/A	_,	, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered A it. I am fam	Agent: uiliar with and accept	the obligations of the position.
_	Sig	gnature of New Regist	tered Agent, if changing SS 3
	P	age 1 of 4	₩ A ··

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u> s
1) Change	V	Frank Ragonese	27499 Riverview Center Blvd
Add			Bonita Springs, Florida
X Remove			34134
2) Change	D	Robert Walker	26944 Montego Pointe Court #202
X Add			Bonita Springs, Florida 34134
Remove	D	Fredrik Mischler	27261 Oak Knolls Drive
3) Change			Bonita Springs, Florida
Add			
X Remove			34134
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
Additional Article: Iona House may provide food distribution services to the needy. In order to create the appropriate
infrastructure, Iona House may purchase or rent facilities and equipment required to support a food pantry mission.
Additional Article: In order to help the needy requiring temporary assistance related to housing, Iona House may provide
no interest loans.
1

,		November 16, 2015	
	date of each amer this document was	adment(s) adoption:signed.	_, if other than the
Effe	ective date <u>if appli</u> e		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not be the on the Department of State's records.	e listed as the
Ada	ption of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	November 18, 2015	
	Signature		_
		(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)	
		Joseph Gallagher	
		(Typed or printed name of person signing)	
		President, Iona House Corporation	
		(Title of person signing)	