

N 93000004/31

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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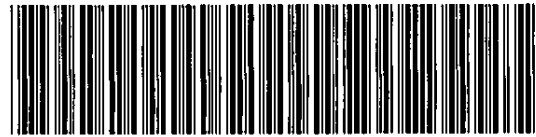
(Business Entity Name)

(Document Number)

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2014 OCT 29 AM 10:49

SECRETARY OF
TALLAHASSEE, FL

14 OCT 29 AM 11

APPROVED
AND
FILED

Amend
@ 10.29.14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Counseling and Education Associates, Inc.

DOCUMENT NUMBER: N93000004131

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Francis P Fitzpatrick

(Name of Contact Person)

(Firm/ Company)

313 NE 9th St

(Address)

Gainesville, FL 32601

(City/ State and Zip Code)

fredd11708@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Francis Fitzpatrick

(Name of Contact Person)

at 352 642-6465

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

Counseling and Education Associates, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N93000004131

(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:

not applicable

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**)

not applicable

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

not applicable

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:

not applicable

(Florida street address)

New Registered Office Address:

not applicable

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 29 AM 11:11

APPROVED,
AND
FILED

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Dan Fitzpatrick</u>	<u>1236 NE 19th Place</u> <u>Gainesville, FL</u> <u>32609</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Bill Pegler</u>	<u>315 NE 9th St</u> <u>Gainesville, FL</u> <u>32601</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Katie Fitzpatrick</u>	<u>1236 NE 19th Place</u> <u>Gainesville, FL</u> <u>32609</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Nancy Coryell</u>	<u>308 SE 6th St</u> <u>Gainesville, FL</u> <u>32601</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VD</u>	<u>Karen Epple</u>	<u>1236 NE 19th Place</u> <u>Gainesville, FL</u> <u>32609</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VD</u>	<u>Kali Blount</u>	<u>401 SE 6th Terr</u> <u>Gainesville, FL</u> <u>32601</u>

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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<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
X Add	<u>SV</u>	<u>Sally Smith</u>

Address

1) <input type="checkbox"/> Change	<u>D</u>	<u>Amber Kelly</u>	<u>429 NW 3rd St</u>
<input type="checkbox"/> Add			<u>Gainesville, FL</u>
<input checked="" type="checkbox"/> Remove			<u>32601</u>

2) Change _____

Add _____

Remove _____

3) Change _____

Add _____

Remove _____

4) _____ Change _____
 _____ Add _____
 _____ Remove _____

5) ☐ Change _____

☐ Add _____

☐ Remove _____

6) ____ Change _____
 ____ Add _____
 Remove _____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Article VII- Dissolution

Upon the dissolution of this organization , assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

The date of each amendment(s) adoption: October 28, 2014, if other than the date this document was signed.

Effective date if applicable: October 28, 2014
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ 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 October 28, 2014

Signature Francis F. Fitzpatrick
(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)

Francis Fitzpatrick

(Typed or printed name of person signing)

Chairman/President

(Title of person signing)