196000001485

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2013 MAR 20 AM 9: 25 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

Association fo	r Retarded Citizens	Foundation of North Florida
DOCUMENT NUMBER: N9600000	1485	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Bobbie Lake, Executive	Director	
	(Name of Contact Person)
Association for Retarded Ci	tizens Founda	tion of North Florida
	(Firm/ Company)	
511 Goldkist Blvd, SW		
· · · · · · · · · · · · · · · · · · ·	(Address)	
Live Oak, FL 32064		
	(City/ State and Zip Code	e)
blake@arcnfl.cor	ned for future annual report i	notification)
For further information concerning this matter, pleas	·	•
Bobbie Lake	_{at (} 386	2081400 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	2 □\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

Association for Retarded	l Citizens Fo	undation of North Florida, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)			
N96000001485			
(Documen	t Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporat		s, this Florida Not For Profit Corporation adopts the f	ollowing
A. If amending name, enter the new na	me of the corporati	on:	
The Arc North Florida For	undation, Ind	.	The new
name must be distinguishable and contain "Company" or "Co." may not be used in		ion" or "incorporated" or the abbreviation "Corp." o	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		511 Goldkist Blvd, SW	
		Live Oak, FL 32064	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		511 Goldkist Blvd, SW	
		Live Oak, FL 32064	
D. If amending the registered agent and new registered agent and/or the new		e address in Florida, enter the name of the ddress:	
Name of New Registered Agent:	Bobbie Lak		
	511 Goldkist Blvd, SW		
New Registered Office Address:		(Florida street address)	
New Registered Office Address.	Live Oak	ru FL	
	(City)	, Florida L (Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		Agent: Miliar with and accept the obligations of the position	2013 MAR
Sign	nature of New Regis.	tered Agent, if changing	AR 20
((Page 1 of 4	A I

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	<u>V</u> <u>Mi</u>	on Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Cliff Adams	1234 US Highway 129
X Add			Jasper, FL 32052
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	S	Frank Carroll	Deceased
Add			
X Remove	Р	Florant Strinkland	7700 CD 050
3) X Change	<u> </u>	Flarzell Strickland	7788 CR 252
Add			Live Oak, FL 32060
Remove			
4) Change	<u>s</u>	Jeannette Clark	14001 SR 51
XAdd			Live Oak, FL 32060
Remove			
5) Change	D	Jerry Moellenkamp	8471 137th Road
Add			Live Oak, FL 32060
X Remove			
6) Change			
Add			
Remove			

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

The	date of each amendment(s) adoption: 02/27/12
Effe	ective date if applicable:
	(no more than 90 days after amendment file date)
Ado	option of Amendment(s) (<u>CHECK ONE</u>)
	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 3/14/13
	Dated 3/14/13 Signature Raysl n Stucked
	(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)
	Flarzell Strickland
	(Typed or printed name of person signing)
	President
	(Title of person signing)