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AND ASSOCIATION ASSOCIATION AND ASSOCIATION ASS

FILED

C. LEWIS

MAY 2 1 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Horida Intergovernmental Relations Funda
DOCUMENT NUMBER: 593387410
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heather Stearns (Name of Contact Person)
Executive office of the Governor (Firm/Company)
400 S. Manroe Street, Room 209
Tallahassee, FL 32399-0001 (City/State and Zip Code)
Heatner, Stearns @ eag, my fich'de - cem E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Heatner Stearns at (850) 717-9310 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

- - 2661 Executive Center Circle
Tallahassee, FL 32301

APPROVES AND FILED

Articles of Amendment to Articles of Incorporation

14 MAY -9 PM 2: 22

Heraovernmental Rocatio (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: 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: (Florida street address) New Registered Office Address: Florida (Citv) (Zip Code)

Page 1 of 4

Signature of New Registered Agent, if changing

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

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

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.

X Change X Remove X Add	<u>V</u> <u>Mike</u>	Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>PD</u>	Brad Piepenbnin	L 400 S. Manroe St. Tall. FL 32399
Remove 2) Change Add	PD	Sam verghese	400 5. Monroe St. Tall. FL 32399
Remove 3) Change Add			
Remove 4) Change Add	_		
Remove 5) Change Add			
6) Change Add			

utach additional sheets, if necessary).	icles, enter change(s) her (Be specific)		
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APPROVLU AND FILED

The date of each amendment(s) adoptio	on:	, if other than the
date this document was signed.	14 MAY -9 PM 2: 22	
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date). IT STATE	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated 5 7	/14	
Signature #	-	
0	or vice chairman of the board, president or other officer-if directors	
	ected, by an incorporator – if in the hands of a receiver, trustee, or	
other court appoin	nted fiduciary by that fiduciary)	
Samuel	Verghese	
(Typ	ed or printed name of person signing)	
Me	President	
	(Title of person signing)	