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(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	<i>,</i>
Special Instructions to Filing Officer:	
<u> </u>	_

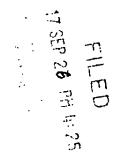
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Habitat for Human	nity of Osceola County, Inc
N96000004793 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.
Please return all correspondence concerning this mat	atter to the following:
Madeline A Santangelo	
	(Name of Contact Person)
Habitat for Humanity of Osceola County, Inc	
	(Firm/ Company)
2340 N Orange Blossom Trail	
	(Address)
Kissimmee, Florida 34744	
	(City/ State and Zip Code)
admin@habitatosccola.org	
E-mail address: (to be use	sed for future annual report notification)
For further information concerning this matter, please	se call:
Madeline A Santangelo	484 680-4935
(Name of Contact Perso	on) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	& D\$43.75 Filing Fee & D\$52.50 Filing Fee s Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Habitat for Humanity of Osceola County, Inc.					
(Name of Corporation	as current	tly filed with the Florida	Dept. of State)	.	
N96000004793					
(Docur	ment Numbe	er of Corporation (if know	vn)		
Pursuant to the provisions of section 617.1006, Flomendment(s) to its Articles of Incorporation:	orida Statute:	es, this <i>Florida Not For P</i>	Profit Corporation a	dopts the following	
If amending name, enter the new name of the	e corporati	<u>ion:</u>		774	
ame must be distinguishable and contain the word	d "corporat	tion" or "incorporated" o	or the abbreviation	The new "Corp." or "Inc."	
Company" or "Co." may not be used in the nam	<u>1e</u> .				
3. Enter new principal office address, if applica	able:	2340 N. Orange Blossor	n Trail		
Principal office address <u>MUST BE A STREET A</u>		Kissimmee, Fl 34744		· · · · · ·	,
					
				22	r
Enter new mailing address, if applicable:				平平四	
(Mailing address MAY BE A POST OFFICE	BOX)				
				2.7	
		 			
. If amending the registered agent and/or regis			ter the name of the		
new registered agent and/or the new register					
Name of New Registered Agent:	Madeline !	Santangelo			
	2340 N O	Prange Blossom Trail			
Manu D. See J. Com.		(Florid	la street address)		
<u>New Registered Office Address:</u>	: Kissimme			24744	
	Kissimme		, Florida		
		(City)	(Zip (Code)	
iew Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered / nt. am fan	Agent: miliar with and accept the	obligations of the p	osition.	
	_ < 0		> (/	16
<u> </u>	X	rumer (elds 1	orraine	V0
_	Jig	ignature of New Registere	d Agent, if changing	Oraine Freder Inhetat Br	<i>t</i> ,
			1	1-1-1-1 BZ	gen
	_		+	JULIU-	
	P	Page 1 of 4			

Page 1 of 4

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>Mike</u>	Doe e Jones v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Treasure	James Cusimano	1344 E Vine Street
Add			Kissimmee, FL 34744
Remove			
2) Change	S	Martha Cusimano	1344 E Vine Street
Add			Kissimmee, FL 34744
X Remove			
3) Change	Presiden	Lorraine Valdes	1344 E Vine Street
X Add			Kissimmee, FL 34744
Remove			
4) Change	Treasure	Joseph Popet	2340 N. Orange Blossom Trail
X Add			Kissimmee, Fl. 34744
Remove			
5) Change	S	Madeline A. Santangelo	2340 N. Orange Blossom Trail
X Add			Kissimmee, FL 34744
Remove			
6) Change	VP	Irwin Inwood	2340 N. Orange Blossom Trail
X Add			Kissimmee, FL 34744
Remove			

ttach additional sheets, if necessary).	(Be specific)	
		_
<u> </u>		

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
Signature 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)
Lorraine Valdes
(Typed or printed name of person signing)
Prisident Hibrilat for Hundritz (Title of person signing)
OSCHALL CONTROL