

N97000005098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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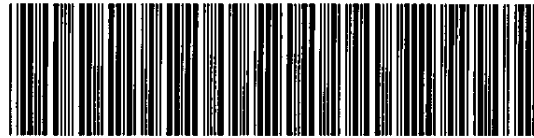
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: St. Vincent's Social Works Foundation Support Committe, Inc.

DOCUMENT NUMBER: N97000005098

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

Please return all correspondence concerning this matter to the following:

Mabel Flores

(Name of Contact Person)

St. Vincent's Social Works Foundation Support Committe, Inc.

(Firm/ Company)

10421 S.W. 87th Court

(Address)

Miami, Florida 33176

(City/ State and Zip Code)

For further information concerning this matter, please call:

Mabel Flores

(Name of Contact Person)

at (305) 273-5274

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2008

MABEL FLORES
10421 SW 87TH COURT
MIAMI, FL 33176

SUBJECT: ST. VINCENT'S SOCIAL WORKS FOUNDATION SUPPORT
COMMITTEE, INC.
Ref. Number: N97000005098

We have received your document for ST. VINCENT'S SOCIAL WORKS FOUNDATION SUPPORT COMMITTEE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 808A00052497

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SECRETARY OF STATE
TALLAHASSEE, FL 32310-0001

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

(Document number of corporation (if known))

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may **not** be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: August 1st, 2008

Effective date if applicable: August 1st, 2008
(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 was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

Mabel Flores
(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.)

Mabel Flores

(Typed or printed name of person signing)

Director

(Title of person signing)

FILING FEE: \$35