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| (Re | equestor's Name) | 3331, 3331, |
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| PICK-UP | ☐ WAIT | MAIL |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| Tol Class | 1. Dila Ca | LM. C. M. | |
|---|-------------------------------|-------------------------------------|----------|
| NAME OF CORPORATION: <u>John Gilmor</u> American | Historia de | Men/MUSeum for Minco | |
| $K \subset \mathcal{A}$ | 777510Kgana | a Line. | |
| DOCUMENT NUMBER: 1996 | XXX (00) | | _ |
| The enclosed Articles of Amendment and fee are submi- | tted for filing. | | |
| Please return all correspondence concerning this matter | to the following: | | |
| Althemese BARNE | 5 | | _ |
| C | Name of Contact Persor | n) | |
| John Gilmore Riber (American History and Cu | enter/Muse | un for Africa | _ |
| American History and Cu | Hure Iac. | | |
| | (Address) | | |
| 419 East Jeffer | , | ļ- | |
| ((| City/ State and Zip Code | e) | _ |
| TALLA HASSEE, Floria | 19 32301 | 1 | |
| E-mail address: (to be used for | or future annual report i | notification) abarnes 261969 | mas, Lom |
| For further information concerning this matter, please ca | | 681.7881 or | |
| Althornoca BADICA | | 850) 766. 4266 | |
| Althemese BARNES (Name of Contact Person) | | ea Code) (Daytime Telephone Number) | _ |
| Enclosed is a check for the following amount made paya | able to the Florida Depa | • | |
| \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup | 3 \$43.75 Filing Fee & | □\$52.50 Filing Fee | |
| Certificate of Status | Certified Copy | Certificate of Status | |
| | (Additional copy is enclosed) | Certified Copy (Additional Copy is | |
| | encioseu) | Enclosed) | |
| Mailing Address | | <u>Address</u> | |
| Amendment Section | | ment Section | |
| Division of Corporations | Divisio | n of Corporations | |

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

| Articles o | f Incor | poration |
|------------|---------|----------|
|------------|---------|----------|

| Articles of incorporation | |
|---|---|
| V9X0002099 | |
| (Normal Comparison as appendix filed with the Florida Dant of State) | |
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| JOHN bilmore Kiley (xnter and Mus | eum In |
| (Document Number of Corporation (if known) | (|
| (Document Family) | |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> amendment(s) to its Articles of Incorporation: | adopts the following |
| A. If amending name, enter the new name of the corporation: | |
| 114 | Tl |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation | The new |
| | Corp. or mc. |
| "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) | |
| | |
| | |
| - 1.00 to - | |
| , | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
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| | |
| | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of th | ie |
| new registered agent and/or the new registered office address: | |
| 111 | |
| Name of New Registered Agent: 1/17 | |
| · | |
| | |
| (Florida street address) New Registered Office Address: | |
| неш кеушегей Описе жийгезг. | |
| Florid | la |
| | 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. |
| | |
| | _4 |
| | 20-100 CD |
| Signature of New Registered Agent, if changi | ng mini 💆 |
| | - |
| | $-$ ကြို κ $ \dot{\omega}$ $-$. |

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: XChange X Remove X Add | PT John Do V Mike Jo SV Sally Sı | <u>ones</u> | |
|---------------------------------|--|------------------|--|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | ChAirman | Melody Hadley | <u> </u> |
| Add | | , 1 | |
| Remove | | | |
| 2) Change | Vice ChAiR | Reginald Ellis | |
| Add | | · | |
| Remove | ~ · | | |
| 3) Change | Secretary | Audrey Smith | |
| Add | 1 | J | |
| Remove | | | |
| 4) Change | TRUSHER | Roselvolt Sawyel | |
| Add | | • | |
| Remove | | | |
| 5) Change | TARA DAVIS | Parliamentarian | |
| Add | | | |
| Remove | | | |
| 6) Change | Chairman | Annie SHARRIS | 4134 W. Georgia St. Tallahassee, Fl |
| Add | | | • |
| Remove | | | 32301 |

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:

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| Example: X Change X Remove X Add | PT John I V Mike SV Sally | <u>Jones</u> | • |
|----------------------------------|---------------------------------|---------------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | Secretary. | Sandra Kay Collins | 1315. SKate Drive Tallahassee, F1. 32312 |
| 2) Change | Vice-Chair | Darius Young | 1579 Marion Ave. Yallahassee, Fl. 32303 |
| Remove 3) Change Add Remove | Theasurer | Maggie Lewis Butter | 4169 Mercury Dr. Tallahassee, FI. 32305 |
| | Parliamentan | a Kyle Eidahl | 2012 Lee Ave. Tallahassee, Fl. 32308 |
| 5) Change Add | Director | Theresa Sawyer | |
| Add Remove | Director | Karwynn Paul | 9659 Pebble Beach Way Vallahussee, Fl. |
| 1 | | Page 2 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:

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| Example: X Change X Remove X Add | | Doe Jones Smith | |
|----------------------------------|--------------|-----------------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | Director | Bernard Williams | 535 Appleyard Dr. Fallahassel, Fl. 32304 |
| 2) Change Add | Divedor | Darrell Furuseth | 234 E. 7th Avenue Tallahassee, Fl. |
| Remove 3) Change Add | | | 32303 |
| Remove 4) Change Add Remove | | | |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |
| 1011040 | | Dans 2 a64 | |

| If amending or adding additional sheets, if necessity | essary). (Be spe | cific) | _ _ | | |
|---|------------------|---------------------------------------|----------------|---------------------------------------|-----------------|
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| The date of each amendment(s) adoption: | , if other than th |
|---|-------------------------------|
| date this document was signed. | |
| 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 document's effective date on the Department of State's records. | ite will not be listed as the |
| Adoption 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 was/were sufficient for approval. | ent(s) |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) was/w adopted by the board of directors. | /ere |
| Dated 18/16 | |
| Signature Unnes Harris | |
| (By the chairman or vice chairman of the board, president or other officer-if direction have not been selected, by an incorporator – if in the hands of a receiver, trusted | |
| other court appointed fiduciary by that fiduciary) | , VI |
| Annie Hakkis | |
| (Typed or printed name of person signing) | |
| Chairman of the Board | |
| (Tite of person signing) | |