N98000003937

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	PHA, ZETA ALPHA LAMDA CHAPTER EDUCATIONAL AND CHAR
DOCUMENT NUMBER: N98000003937	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
T. Carlton Williams	
	(Name of Contact Person)
ALPHA PHI ALPHA, ZETA ALPHA LAMDA CH	HAPTER EDUCATIONAL AND CHARITABLE FOUNDATION, INC.
	(Firm/ Company)
6380 Оѕргеу Теттасе	
	(Address)
Coconut Creek, Florida 33073	
	(City/ State and Zip Code)
tcwilliams15@gmail.com	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, please	se call:
T. Carlton Williams	954 661-5717
(Name of Contact Perso	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Ar	rticles of Amendment	
	to ticles of Incorporation of	Eliza.
ALPHA PHI ALPHA, ZETA ALPHA LAMDA CHAPT	TER EDUCATIONAL AND	CHARITABLE FOUNDATION, INC.
Name of Corporation as currently filed with the Flori	ida Dept. of State)	
N98000003937		
(Document No	umber of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated	or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	N/A ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered offi	ice address:	
New Registered Office Address:	(Flo	rida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I are		he obligations of the position.
	Signature of New Registe	

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					
Type of Action (Check One)	Title	<u>Name</u>			Address
1) Change Add	<u>S</u>	Eugen	e Thomas	<u>F</u>	Pembroke Pines, FL
× Remove				_	
2) Change Add	<u>v</u>	Ricky	Stuart		6307 NW 17th Court Pembroke Pines, FL 33028
x Remove 3) Change Add Remove	•				
4) Change Add	·				
Remove					
5) Change Add					
Remove					
6) Change Add					
Remove				_	
E. If amending or adding (attach additional sheet	g addition s, if neces	sarv). (Be spe	ter change(s) here:		
N/A					
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		¥/1/2020						
The date of each amendment(date this document was signed.	(s) adoption:	0/1/20/20		<u> </u>			, if other tha	n the
Effective date if applicable:	8/1/2020							
	(ne	o more than !	90 days afte	r amendmen	t file date)			
Note: If the date inserted in thi document's effective date on the	is block does i c Department	not meet the a of State's re-	applicable s cords.	tatutory filin	g requirement	s, this date wil	I not be listed as the	<u>.</u>
Adoption of Amendment(s)	(9	CHECK ON	<u>E</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 Signature 8/3/2020 Cartoa M
	(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)
	T. Carlton Williams
	(Typed or printed name of person signing)
	President
	(Title of person signing)