

N98 000004850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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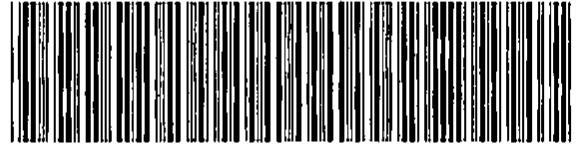
(Business Entity Name)

(Document Number)

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JUL 29 2019

SECRETARY OF STATE
TALLAHASSEE, FL

2019 JUL 19 PM 5:07

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2019

FAYE BOOKER
13325 NW 18 PLACE
MIAMI, FL 33167

SUBJECT: NU CHAPTER OF CHI ETA PHI SORORITY, INCORPORATED
Ref. Number: N98000004850

We have received your document for NU CHAPTER OF CHI ETA PHI SORORITY, INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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) 245-6050.

Catherine M Wood
Regulatory Specialist II

Letter Number: 019A00013507

Articles of Amendment
to
Articles of Incorporation
of

Ny Chapter of Chi Eta Phi Sorority, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N 98 00000 4850

(Document Number of Corporation (if known))

FILED
2019 JAN 19 PM 5:07
SECRETARY OF STATE
TALLAHASSEE, FL

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:

The new 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)

3321 N.W. 188th St.

Miami Gardens Florida

33067

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3321 N.W. 188th Street

Miami Garden Fl

33056

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:

JOANN GUYTON

3321 N.W. 188th St.

(Florida street address)

New Registered Office Address:

Miami Gardens

(City)

Florida

33056

(Zip 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.

JOANN GUYTON

Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|-----------|---------------------|--|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>PT</u> | <u>FAYE Booker</u> | <u>13325 N.W. 18th</u>
<u>Miami FL 33167</u> |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>PT</u> | <u>Joann Guyton</u> | <u>3321 N.W. 188th St.</u>
<u>Miami Gardens FL</u>
<u>33056</u> |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | _____ | _____ | _____ |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

No

The date of each amendment(s) adoption: 6/17/2019 if other than the date this document was signed.

Effective date if applicable: 5/30/19
(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.

Dated 6/17/2019

Signature Faye Booker
(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)

Faye Booker
(Typed or printed name of person signing)

president
(Title of person signing)