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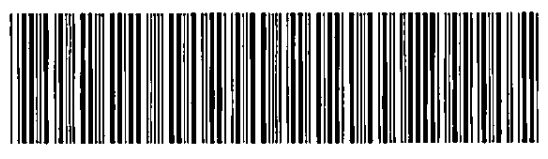
(Business Entity Name)

(Document Number)

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NC

SEP 26 2017

FILED
17 SEP 26 PM 3:45
SECRETARY OF STATE
TALLAHASSEE FL 32304



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2017

CURTIS P PARKS
1450 FLAGLER AVE #14
JACKSONVILLE, FL 32207

SUBJECT: AMBASSADOR TRUST, INC.
Ref. Number: N98000005421 ,

We have received your document for AMBASSADOR TRUST, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you have submitted is for a profit corporation to become a profit benefit corporation. Because you are a not for profit corporation, you cannot file this type of form. Please see the enclosed information.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 617A00017895

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AMBASSADOR TRUST INC

DOCUMENT NUMBER: N98000005421

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

Please return all correspondence concerning this matter to the following:

CURTIS P PARKS

(Name of Contact Person)

ICON ATTRACTIONS LLC

(Firm/ Company)

1450 FLAGLER AVE #14

(Address)

JACKSONVILLE, FL 32207

(City/ State and Zip Code)

cparks@iconattractions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Curtis P Parks

(Name of Contact Person)

904

at

563-0532

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

FILED

17 SEP 26 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

AMBASSADOR TRUST INC

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

N98000005421

(Document Number of Corporation (if known))

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:

LIFEWORX LEADERSHIP FIRST COAST INC

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)

C/O PARC MANAGEMENT

8649 BAYPINE RD BLDG #7 STE 101

JACKSONVILLE, FL 32256

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

C/O PARC MANAGEMENT

8649 BAYPINE RD BLDG #7 STE 101

JACKSONVILLE, FL 32256

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:

CURTIS P PARKS

1450 FLAGLER AVE #14

(Florida street address)

New Registered Office Address:

JACKSONVILLE

(City)

Florida 32207

(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.



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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PD</u>	<u>CHRISTIE, CHARLES V</u>	<u>84 PLAYERS CLUB DRIVE</u>
<input type="checkbox"/> Add			<u>PONTE VEDRA BEACH</u>
<input checked="" type="checkbox"/> Remove			<u>JACKSONVILLE, FL 32082</u>
2) <input type="checkbox"/> Change	<u>PD</u>	<u>MCCLAFFERTY, TAMMIE</u>	<u>C/O PARC MANAGEMENT</u>
<input checked="" type="checkbox"/> Add			<u>8649 BAYPINE RD BLDG #7 ST1</u>
<input type="checkbox"/> Remove			<u>JACKSONVILLE, FL 32256</u>
3) <input type="checkbox"/> Change	<u>SD</u>	<u>CHRISTIE, REBECCA R</u>	<u>PO BOX 737</u>
<input type="checkbox"/> Add			<u>PONTE VEDRA BEACH</u>
<input checked="" type="checkbox"/> Remove			<u>JACKSONVILLE, FL 32004</u>
4) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>
5) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>
6) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			<u> </u>
<input type="checkbox"/> Remove			<u> </u>

N/A

The date of each amendment(s) adoption: 07/01/2017, if other than the date this document was signed.

Effective date if applicable: 07/01/2017
(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

9/6/2017

Signature

Curtis Parks

(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)

CURTIS P PARKS

(Typed or printed name of person signing)

CHAIRMAN OF BOARD

(Title of person signing)