N9900005902

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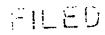
TO: Amendment Section Division of Corporations The Jobs Partnershp of Florida, Inc. NAME OF CORPORATION: N99000005902 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michele Ryder (Name of Contact Person) The Jobs Partnership of Florida, Inc. (Firm/ Company) 2250 Lee Road, Suite 201 (Address) Winter Park, FL 32789 (City/ State and Zip Code) mryder@jobspartnership.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michele Ryder 641-0755 x101 (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) 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

Articles of Amendment fo Articles of Incorporation of



2024 AHG 12 AM 11: 35

The Jobs Partnershp of Florida, Inc.		Cara Grand 1 E 1111
(Name of Corporation as c	currently filed with the Flor	ida Dept. of State) Jack
N99000005902		in in Taxapp we say
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the cor	poration:	
The Jobs Partnership of Florida, Inc.		21
name must be distinguishable and contain the word "co	prporation" or "incorporated	The new I" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	in production of the second	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDI	RESS) N/A	
	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) <u>N/A</u>	
	N/A	
,	N/A	
D. If amending the registered agent and/or registere		enter the name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent:	\	
N/A	١	
_	(FI	orida street address)
New Registered Office Address:		
N/A	\ 	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I		the obligations of the position.
	NIA	
	N A Signature of New Regist	ered 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: X Change X Remove X Add	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Do Mike Jo Sally Sn	<u>nes</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		- a.		_	
Add				-	
Remove				-	
2) Change		_		_	
Add				_	
Remove					
3) Change				-	
Add				-	
Add				-	
4) Change					
Add		_		_	
Remove				-	
5) Change					
Add					
Remove				-	
KCHW/YC				-	
6) Change		_		_	
Add				_	
Remove				_	

If amending or adding a attach additional sheets,	additional Articles if necessary). (B	s, enter change(s) le specific)	here:		
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N/A	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
N/A Effective date if applicable:	
(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 dat document's effective date on the Department of State's records.	te 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 amendme was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/we adopted by the board of directors.	ere
Dated August 5, 2024	
Signature Mac S	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
Mare Stanakis	
(Typed or printed name of person signing)	_
President and CEO	
(Title of person signing)	