## P11000094909

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## **COVER LETTER**

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		<u>COVER LETTER</u>		
TO: Amendment Section Division of Corpo				
NAME OF CORPOR	ATION: CRAWFORD & C	CO. INT'L, INC		
DOCUMENT NUMB	P1700004400			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		···
Please return all corresp	pondence concerning this ma	tter to the following:		
ı	Kesley Crawford			
-		Name of Contact Person	1	
-		Firm/ Company		
	1111 E Sunrise Blvd Apt#	708		
		Address		
  -	Ft Lauderdale, FL 33304			
		City/ State and Zip Code	e	
kesch	ar66@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, please	se call:		
Kesley Crawford		754 at (	224-9553	
Name o	f Contact Person		de & Daytime Telephone Number	<del></del>
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O.	ing Address Indiment Section Indicate of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of



CRAWFORD & CO. INT'L, INC

P17000094909		ntly filed with the Florida Dept. of State)	
	·	ntly filed with the Florida Dept. of State)	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new nar	ne of the corporation:		
Human Services Council, Inc		_ The new	
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, if applicable:		233 E Bay St	
(Principal office address MUST BE A ST		Suite 916	
		Jacksonville, FL 32207	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		233 E Bay St	
(Mailing duaress MAT BE A FOST O	FFICE BUX	Suite 916	
		Jacksonville, FL 32207	
D. If amending the registered agent and			
	ew registered office address:  Kesley Crawford		
Name of New Registered Agent		16	
	233 E Bay St, Suite 9	street address)	
- -	(1.10/1884)		
-	Jacksonville	. Florida	

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.

X Change	PT John	<u>Doe</u>	•
X Remove	V Mike	<u>Jones</u>	
<u>X</u> Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	Kesley Crawford	233 E Bay St
Add			Suite 916
Remove			Jacksonville, FL 32207
2) Change	<u>coo</u>	Coretha Smith	P.O. Box 1465
X Add Remove 3) Change X Add	<u>(FO</u>	Crwendolyn Phillips	233 E BAY St Suite 9/Lo JACKSONVILLE, FL 3220
Remove 4) Change	VP	Kevin Crawford	841 Prudential Dr
Add	<del> </del>	10	
X Remove			Jacksonville, FL 32207
5) Change	Secy	Armani Crawford	841 Prudential Dr
Add			
X Remove			Jacksonville, FL 32207
6) Change	<del></del>		
Add			
Remove			

	(Be specific)
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f an amandmant neavides for an arch	ange, reclassification, or cancellation of issued shares,
an amenument provides for all exch	- d
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
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provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	•	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	it.
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	27	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other court	
appoin	ed fiduciary by that fiduciary)	
	Kesley Crawford	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	· · ·