

N 1800005007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

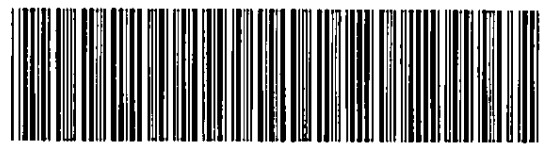
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Received call from D Kennedy to
approve removing a page of
officer/directors that did not
belong for this corporation on 11/1/2018
ST

Office Use Only



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OCT 31 2018

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18 OCT 23 PM 5:20
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Amend

Articles of Amendment
to
Articles of Incorporation
of

CENTRAL FLORIDA RESTORATION INDUSTRY ASSOCIATION, INC.,

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

N 1800005007

(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:

_____ 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)

122 E Main Street

Lakeland, FL 33801 Phone: 863-225-1950

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1006 NW 87 AVENUE APT 102

Miami, FL 33172

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:

DELIA ROSA KENNEDY

1006 NW 87 AVENUE APT 102

(Florida street address)

New Registered Office Address:

DORAL

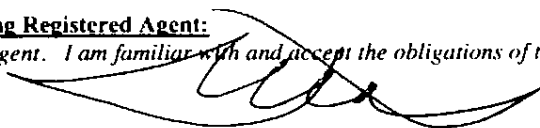
(City)

Florida 33172

(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

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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 <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>MANUEL IDELFONSO</u>	<u>5775 Blue Lagoon Drive</u> <u>Suite 300</u> <u>Miami, FL 33126-2579</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>SYLVESTER JOHNSON</u>	<u>5775 Blue Lagoon Drive</u> <u>Suite 300</u> <u>Miami, FL 33126-2579</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>JOSE ENRIQUEZ RODRIGUEZ</u>	<u>5775 Blue Lagoon Drive</u> <u>Suite 300</u> <u>Miami, FL 33126-2579</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>ANA RIVERA</u>	<u>5775 Blue Lagoon Drive</u> <u>Suite 300</u> <u>Miami, FL 33126-2579</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CLERK</u>	<u>DELIA ROSA KENNEDY</u>	<u>5775 Blue Lagoon Drive</u> <u>Suite 300</u> <u>Miami, FL 33126-2579</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

October 15, 2018

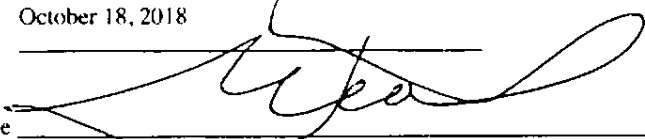
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 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 October 18, 2018
 Signature 

(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)

Debra R Kennedy
 (Typed or printed name of person signing)

clerk P
 (Title of person signing)