

N22000006626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

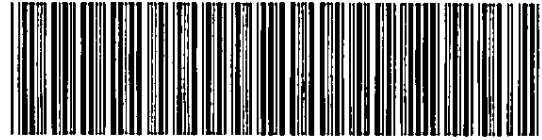
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/3

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MARY MCLEOD BETHUNE NATIONAL ALUMNI ASSOCIATION INC

DOCUMENT NUMBER: N22000006626

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

Please return all correspondence concerning this matter to the following:

LaVaughn Starks

(Name of Contact Person)

MARY MCLEOD BETHUNE NATIONAL ALUMNI ASSOCIATION INC

(Firm/ Company)

5460 N Ocean Dr Suite 12B

(Address)

Riviera Beach, Fl 33404

(City/ State and Zip Code)

treasurer@mmbnaa.org

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

For further information concerning this matter, please call:

LaVaughn Starks

561

3130249

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment
to
Articles of Incorporation
of

MARY MCLEOD BETHUNE NATIONAL ALUMNI ASSOCIATION INC

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

N22000006626

(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:

NA _____ *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. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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.

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 type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input 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	_____	_____	_____

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 TALLAHASSEE, FLORIDA

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

SEE ATTACHED CHAPTERS THAT NEED TO BE ADDED

Please Attach
The Chapters
To Our
Articles INC.

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

Effective date if applicable: June 9, 2022
(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 June 20, 2022 _____

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)

LaVaughn Starks

(Typed or printed name of person signing)

Treasurer MMBNAA

(Title of person signing)

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TALLAHASSEE, FLORIDA

Mary McLeod Bethune National Alumni Association, Inc.
Document number of this corporation is N22000006626
CHAPTERS

Alachua County - MMBNAA
Atlanta- MMBNAA
Big Bend- MMBNAA
Brevard County- MMBNAA
Broward- MMBNAA
Central Virginia- MMBNAA
Chicago- MMBNAA
Coastal Georgia- MMBNAA
Dallas Fort Worth- MMBNAA
Detroit- MMBNAA
Duval-Nassau- MMBNAA
Escambia- MMBNAA
Ft. Pierce- MMBNAA
Nassau Bahamas- MMBNAA
Grand Bahamas (Freeport)- MMBNAA
Hillsborough County- MMBNAA
Houston- MMBNAA
Lake City Columbia County - MMBNAA
Marion- MMBNAA
Miami-Dade- MMBNAA
New York- MMBNAA
North/South Carolina- MMBNAA
Ohio- MMBNAA
Orange County (FL)- MMBNAA
Palm Beach- MMBNAA
Polk County- MMBNAA
Putnam-St. Johns- MMBNAA
Seminole- MMBNAA
Southern California- MMBNAA
St. Petersburg- MMBNAA
Tri-State- MMBNAA
Virtual - MMBNAA
Volusia- MMBNAA
Washington Metro- MMBNAA
Marching Alumni MMBNAA

TALLAHASSEE COUNTY
 CLERK OF SUPERIOR COURT

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