



# ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION (NONPROFIT)

State Form 4161 (R19 / 6-19) / Corporate Form 364-2

**SECRETARY OF STATE  
BUSINESS SERVICES DIVISION**  
302 West Washington Street, Room E018  
Indianapolis, IN 46204  
Telephone: (317) 232-6576  
[www.sos.in.gov](http://www.sos.in.gov)

- INSTRUCTIONS:**
1. Use 8½" x 11" white paper for attachments.
  2. Please **TYPE** or **PRINT** in **INK**.
  3. Please visit our office on the web at [www.sos.IN.gov](http://www.sos.IN.gov)
  4. Make check or money order payable to the Secretary of State.
  5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

**INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.**

Name of business
E-mail address of business (SOS use only)

**RETURN DOCUMENTS TO:**

Name		
Street address, line 1		
Street address, line 2		
City	State	ZIP code
Telephone number (     )	E-mail address (If different from above – SOS use only)	





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Indiana Code 23-17-17-1 et. seq.  
23-0.5-9-15

FILING FEE: \$30.00

The undersigned officer of the Nonprofit Corporation named in Article I below (hereinafter referred to as the "Corporation") desiring to give notice of corporate action effectuating Amendment(s) to the Articles of Incorporation, certifies the following facts:

## ARTICLE I – AMENDMENT(S)

SECTION 1: The name of the Corporation is:

SECTION 2: The date of incorporation of the Corporation (*month, day, year*)

SECTION 3: The name of the Corporation following this amendment to the Articles of Incorporation is:

SECTION 4:

The exact text of Article(s) \_\_\_\_\_ of the Articles of Incorporation is now as follows:

SECTION 5:

The date of adoption of the amendment to the Article(s) \_\_\_\_\_ was \_\_\_\_\_, 20\_\_\_\_.

**ARTICLE II – MANNER OF ADOPTION AND VOTE****SECTION 1: Action by the Board of Directors**

The Board of Directors duly adopted a resolution proposing to amend the Article(s) of Incorporation: *(Select one.)*

- ☐ At a meeting held on \_\_\_\_\_, 20 \_\_\_\_\_, at which a quorum of such Board was present.
- ☐ By written consent executed on \_\_\_\_\_, 20 \_\_\_\_\_, and signed by all members of such Board.

**SECTION 2: Action by members****IF APPROVAL OF MEMBERS WAS NOT REQUIRED:**

The Amendment(s) were approved by a sufficient vote of the Board of Directors or incorporators and approval of members was not required.

☐ Yes ☐ No

The Amendment(s) were approved by a person other than the members, and that approval pursuant to Indiana Code 23-17-17-1 was obtained.

☐ Yes ☐ No

**IF APPROVAL OF MEMBERS WAS REQUIRED:**

	TOTAL	MEMBERS OR DELEGATES ENTITLED TO VOTE AS A CLASS		
		1	2	3
MEMBERS OR DELEGATES ENTITLED TO VOTE				
MEMBERS OR DELEGATES VOTED IN FAVOR				
MEMBERS OR DELEGATES VOTED AGAINST				

- ☐ The manner of the adoption of the Articles of Amendment and the vote by which they were adopted constitute full legal compliance with the provisions of the Act, the Articles of Incorporation, and the By-Laws of the Corporation.

**ARTICLE III – REGISTERED AGENT INFORMATION**

**To determine if your Registered Agent is a Commercial Registered Agent (CRA), go to [INBIZ.in.gov](http://INBIZ.in.gov).**

*Provide either commercial registered agent or noncommercial registered agent information below.*

<input type="checkbox"/> Commercial registered agent	Name of registered agent <i>(Do not provide address.)</i>
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**OR**

<input type="checkbox"/> Noncommercial registered agent	Name of registered agent
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Address <i>(number and street)</i> <i>(A P.O. Box is not acceptable unless accompanied by a Rural Route number.)</i>	City	State <b>IN</b>	ZIP code
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**(OPTIONAL)** E-mail address of the registered agent at which the registered agent will accept electronic service of process

- ☐ By checking the box, the Signator(s) represent(s) that the Registered Agent named in these Articles of Amendment has consented to the appointment of Registered Agent.

I hereby verify, subject to penalties of perjury, that the facts contained herein are true.

Signature	Date of signature <i>(month, day, year)</i>
Printed name	Title