



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN  
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

**(Please print or type)**

I, the undersigned \_\_\_\_\_, do hereby certify  
(Name)

that this Resolution of the Board of Directors of \_\_\_\_\_  
\_\_\_\_\_  
(Name of Corporation)

a corporation duly organized and existing under the laws of \_\_\_\_\_,  
(State or Country)

was adopted on \_\_\_\_\_, adopting the alternate  
name of \_\_\_\_\_  
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Chairman, Vice Chairman of the Board, a  
director or any officer

\_\_\_\_\_  
Title of person signing

**FILING FEE \$35**

**(No fee required if submitted with a foreign not for profit qualification or amendment)**

**Make checks payable to Florida Department of State and mail to:**

**Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**