ARTICLES OF AMENDMENT
KALISPEL TRIBE OF INDIANS
NON-PROFIT CORPORATION

(Per Chapter 30, § 30-2.33, §30-2.34, §30-2.35, § 30-2.54 Law and Order Code of the Kalispel Tribe of Indians)

FILING FEE: $20.00

- Type, print or fill in with ink.
- MAKE SURE TO INCLUDE FILING FEE.
  Checks made payable to "**Kalispel Tribe of Indians**"
- Date, sign and send **two originals** to:

KALISPEL TRIBE OF INDIANS
ATTN: TRIBAL SECRETARY
P.O. BOX 39
USK, WA 99180

FOR OFFICE USE ONLY

FILED: / /

PERSON TO CONTACT REGARDING THIS FILING:	**PHONE NUMBER:** (*Include Area Code*)
EMAIL ADDRESS:	

AMENDMENT TO ARTICLES OF INCORPORATION

NAME OF CORPORATION: (*As Currently recorded with the Kalispel Tribal Secretary*)

CORPORATION NUMBER: (*If known*)	**ADMENDMENTS TO ARTICLES OF INCORPORATION WERE ADOPTED ON:** _____

EFFECTIVE DATE OF ARTICLES OF AMDENTMENT: (*Specified effective date may be up to 30 days **AFTER** receipt of the document by the Kalispel Tribal Secretary*)

☐ Specific Date:_____ ☐ Upon Filing by the Kalispel Tribal Secretary

ADOPTION OF THE ARTICLE OF AMENDMENT: (*Please check **ONE** of the following*)

☐ The amendment was adopted by a meeting of members held on (*Specify date*): _____. A quorum was present at the meeting and the amendment received at least two-thirds (2/3) of the votes which members present or represented by proxy were entitled to cast.

☐ The amendment was adopted by consent in writing and signed by all members entitled to vote.

☐ There are no members that have voting rights. The amendment received a majority vote of the directors at a board meeting held on (*Specify date*): _____.

AMENDMENTS TO THE ARTICLES OF INCORPORATION ARE AS FOLLOWS
(If necessary, attach additional amendments or information)

_____

_____

_____

SIGNATURE OF OFFICER
This document is hereby executed under penalties or perjury, and is, to the best of my knowledge, true and correct.

Signature of Officer	***Printed Name***	***Date***