732116

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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SEP 01 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	e of Cities, Inc.		
732116			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are si	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Trish Granger			
	(Name of Contact I	Person)	
Town of Longboat Key			
	(Firm/ Compa	ıy)	-
501 Bay Isles Road			
	(Address)		
Longboat Key FL 34228			
	(City/ State and Zip	Code)	
tgranger@longboatkey.org			
E-mail address: (to be us	sed for future annual re	port notification	1)
For further information concerning this matter, plea	se call:		
Trish Granger	a	941 t	316-1999
(Name of Contact Pers			(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
\$35 Filing Fee Certificate of Statu	& \$\square\$\$ \$\square\$\$ \$\text{Certified Copy}\$ (Additional copy enclosed)	Certifi is Certifi	0 Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Secti vivision of Corpo lifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

15 AUG 31 AM 9: LI

ManaSota League of Cities, Inc.	- 1100 O.L. 1011 21 44
(Name of Corporation as curren	tly filed with the Florida Dept. of State).
732116	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	
name must be distinguishable and contain the word "corporal	The new tion" 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:	501 Bay Isles Road
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Longboat Key FL 34228
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	501 Bay Isles Road
	Longboat Key FL 34228
D. If amending the registered agent and/or registered office	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent: Trish Gra	nger
New Registered Office Address:	(Florida street address)
	Isles Road 34228
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fail	Agent: miliar with and accept the obligations of the position. Law lignature of New Registered Agent, if changing
$\frac{1}{s}$	ignature of New Registered Agent, if changing

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: X Change X Remove X Add	$\underline{\mathbf{V}}$ $\underline{\mathbf{M}}$	hn Doe ike Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	Patrick Roff	101 Old Main St West
Add			Bradenton FL 34205
Remove			
2) X Change	V	Linda Yates	4970 City Hall Blvd
Add			North Port FL 34286
Remove			
3) Change	<u>T</u>	Kit McKeon	401 Venice Av
X Add			Venice FL 34285
Remove			
4) Change	<u>v</u>	Carolyn Mason	1660 Ringling Blvd
Add		•	Sarasota FL 34236
X Remove			
5) Change	,		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Secretary/Treasurer title has changed to eliminate the position of Secretary.		
· · · · · · · · · · · · · · · · · · ·		

	July 9, 2015	
The date of each amendment(s) adoption		, if other than th
date this document was signed.		
July 9, 20	15	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will ent of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
☐ There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated	1/25/15 Patom PM	
Signature	or vice chairman of the board, president or other officer-if directors	
	ected, by an incorporator – if in the hands of a receiver, trustee, or	
	nted fiduciary by that fiduciary)	
	, -,, -,, ,	
Patrick Roff	Patricia m. Roff	
	(Typed or printed name of person signing)	
President	for n fm	
	(Title of person signing)	

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