"NO4960

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CENTRAL FLORIDA CRII	ME PREVENTION OFFICERS ASSOCIATION, INC.
DOCUMENT NUMBER: N04960	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are submit	tted for filing.
Please return all correspondence concerning this matter t	to the following:
LINDA McFADDEN	
(Name of Contact Pers	son)
c/o LAKE COUNTY SHERIFF'S	OFFICE
(Firm/ Company)	
360 WEST RUBY STREET	***
(Address)	
TAVARES, FLORIDA 32778	
(City/ State and Zip Co	ode)
For further information concerning this matter, please ca	11:
	352 343-9513
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifie (Addition	Filing Fee & S52.50 Filing Fee d Copy Certificate of Status onal copy is Certified Copy ed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CENTRAL FLORIDA CRIME PREVENTION OFFICERS ASSOCIATION, INC.

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

N04960

(Document number of corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
CENTRAL FLORIDA CRIME PREVENTION ASSOCIATION, INC.
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
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STATE AND A
-
(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.
Signature — — — — — — — — — — — — — — — — — — —
LINDA McFADDEN
(Typed or printed name of person signing)
TREASURER
(Title of person signing)

FILING FEE: \$35