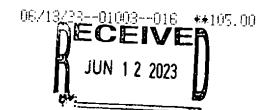
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TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Gulf Coast Commu	nity Foundation, In	c. 				_
DOCUMENT NUMBER:	707345						
The enclosed Articles of Art							
Please return all correspond	ence concerning this mat	ter to the following	:				
Kristin Prince							
		(Name of Contact	Person)				_
Gulf Coast Community For	ındation						
		(Firm/ Comp	any)				_
601 Tamiami Trail South							
		(Address					_
Venice, FL 34285							
		(City/ State and Z	ip Code)		. ,		_
kprince@gulfcoastcf.org					<u> </u>	SECF	. 82JB
F	:-mail address: (to be use	d for future annual	report notil	ication)		- <u>F</u>	_ <u></u>
For further information con	cerning this matter, please	e call:			•	-	C)
Kristin Prince			941 at	486-45	666	; ; ; , n , ,	P::
Evaluated is a shoot facth.	(Name of Contact Person		(Area C	•	ne Telephone Num	iber)]: 02
Enclosed is a check for the	totiowing amount made p	ayable to the Florid	ia izepartm	em of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)	y is	\$52.50 Filing I Certificate of S Certified Copy (Additional Co Enclosed)	Status		
Mailing /	Address		Street Add	ress			

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florid	la Dept. of State)
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Sta amendment(s) to its Articles of Incorporation:	ntutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
	The new
"Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>SS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida, (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the position.
	Signature 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: XChange X Remove X Add	PT John D V Mike John Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		Mark Pritchet	601 Tamiami Trail South Venice, FL 34285
× Remove			
2) Change Add	<u>D</u> -	Phillip Lanham	161 Golden Gate Point, Unit 1 Sarasota, FL 34236
Remove 3) Remove Add Remove			SLORE
4) Change Add	<u> </u>		
Remove			: : : : : : : : : : : : : : : : : : :
5) Change Add	 -		ATE
Remove			
6) Change Add			
Remove			
E. If amending or additional shed		icles, enter change(s) here: (Be specific)	
-			
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					AANSFE, FL	
The date of each amendment date this document was signed					, if other the	an the
Effective date <u>if applicable</u> :	June 1, 2023					
	(no more than 9	0 days after ame	ndment file dat	e)		
Note: If the date inserted in the document's effective date on t			ry filing require	ements, this date v	vill not be listed as th	he
Adoption of Amendment(s)	(CHECK ONE	2)				
■ The amendment(s) was/w	ere adopted by the members	and the number	of votes cast fe	or the amendment	(s)	

was/were sufficient for approval.

There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	May 5, 2023
Signature	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Christine Stobaugh
	(Typed or printed name of person signing)
	Treasurer

(Title of person signing)

