

712320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

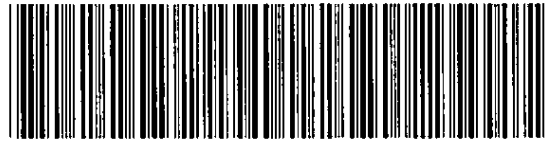
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2023

MICHAEL GRANT
4800 N FEDERAL HIGHWAY, SUITE A-205
BOCA RATON, FL 33431

SUBJECT: DELRAY BEACH POLICE BENEVOLENT ASSOCIATION, INC. OF
DELRAY BEACH, FLORIDA
Ref. Number: 712320

We have received your document for DELRAY BEACH POLICE BENEVOLENT ASSOCIATION, INC. OF DELRAY BEACH, FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please ensure that you check one of the adoption of amendment boxes, as well as sign and date the last page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 623A00027584

12/4/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Delray Beach Police Benevolent Association, Inc. of Delray Beach, Florida

DOCUMENT NUMBER: 712320

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Grant
(Name of Contact Person)

Warren & Grant, P.A.
(Firm/ Company)

4800 N. Federal Highway, Suite A-205
(Address)

Boca Raton, FL 33431
(City/ State and Zip Code)

MICHAEL@WARRENGRANT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Grant at 561 681-9494
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment
to
Articles of Incorporation
of

Delray Beach Police Benevolent Association, Inc. of Delray Beach, Florida

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

712320

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" 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:
*(Principal office address **MUST BE A STREET ADDRESS**)*

N/A

C. Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Michael L. Grant, Esq.

4800 N. Federal Highway, Suite A-205

(Florida street address)

New Registered Office Address:

Boca Raton

(City)

Florida 33431

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am 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:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
✓ 1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Brian T. Long</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>David Stickler</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Jami Russello</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>
✓ 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>C</u>	<u>Richard Marks</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>
✓ 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Dave Stickler</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>
✓ 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Richard Hadden</u>	<u>1025 Mission Hill Road</u> <u>Boynton Beach, FL 33435</u>

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

N/A

AMENDING OFFICERS

	ADD	TITLE	NAME
7	X	D	Jim Crawford
8	X	D	Marshell Slay

4/21/2023 1:00

The date of each amendment(s) adoption: N/A , if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

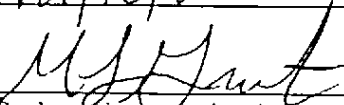
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 12/18/23

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)

Michael L. Grant
(Typed or printed name of person signing)

Registered Agent
(Title of person signing)

12/18/23