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## COVER LETTER

TO: Amendment Section	
Division of Corporations	

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Springtime Tallaha	assee, Inc.	
715823 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Jennifer Shafer		
	(Name of Contact Person)	
Springtime Tallahassee Festival, Inc.		
	(Firm/ Company)	
501 East Tennessee Street. Suite A		
	(Address)	
Tallahassee, FL 32308		
	(City/ State and Zip Code)	
director@springtimetallahassee.com		
E-mail address: (to be use	ed for future annual report notification)	
For further information concerning this matter, pleas	se call:	
Jennifer Shafer	850 224-5012 at	
(Name of Contact Perso		· -,
Enclosed is a check for the following amount made	payable to the Florida Department of State:	-18 
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status		RY OF STATE CURPORATIONS
<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	<del>7</del> 7

## Articles of Amendment to Articles of Incorporation of

Springtime Tallahassee, Inc.

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

715823

(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	
pration" or "incorporated" or the abbreviation "Corp." or		
N/A		
<u></u>		
N/A		
ffice address in Florida, enter the name of the e address:		
(Florida street address)		
Florida (City) (Zip Code)		
		-
familiar with and accept the obligations of the position.	20 JUL	
Signature of New Registered Agent, if changing		100220 10120 10120
	N/A         SS         N/A         N/A         ffice address in Florida, enter the name of the e address:         (Florida street address)         (Florida street address)         (City)       (Zip Code)         ed Agent:         familiar with and accept the obligations of the position.	N/A         N/A         ffice address in Florida, enter the name of the e address:         (Florida street address)         (Florida street address)         (City)       (Zip Code)         ed Agent:         familiar with and accept the obligations of the position.       Notestion         Signature of New Registered Agent. if changing       The street address

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 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John D</u> <u>V Mike J</u> <u>SV Sally S</u>	ones	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) <u>×</u> Change Add	<u> </u>	Joel Jarrett	501 E. Tennessee St., Ste. A Tallahassee, FL 32308
Remove			
2) <u>×</u> Change Add	<u>D</u>	Marcía Deeb Thornberry	501 E. Tennessee St., Ste. A Tallahassee, FL 32308
3) Remove Change Add Remove	<u>D</u>	Ann Melder	501 E. Tennessee St., Ste. A Tallahassee, FL 32308
4) <u>×</u> Change Add	<u></u>	William Trey Faulkner	501 E. Tennessee St., Ste. A Tallahassee, FL 32308
Remove			
<i>5)</i> Change Add	<u> </u>	Matt Scaringe	501 E. Tennessee St., Ste. A Tallahassee, FI, 32308
Remove			
$\begin{array}{c} 6 \end{pmatrix} \underbrace{\qquad}_{X} Change \\ \underline{\times} \\ Add \end{array}$	<u>S</u>	Cristy Stout	501 E. Tennessee St., Stc. A Tallahassee, FL 32308
Remove			

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

 Remove
 S
 Debbie Mabry

 Remove
 D
 Mike Melder

 Remove
 D
 Cindy Martin

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	•		•	
	•		•	

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The date of each amendment	· / · · · · · · · · · · · · · · · · · ·	if other than the
date this document was signed		
Effective date <u>if applicable</u> :	July 1, 2020	

(no more than 90 days after amendment file date)

<u>Note:</u> 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	July 13, 2020
Signature	ALTO
	(By the mairman of vice chairman of the board, preside

(By the chairman of 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)

Joel Jarrett

(Typed or printed name of person signing)

President

(Title of person signing)

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