

723394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

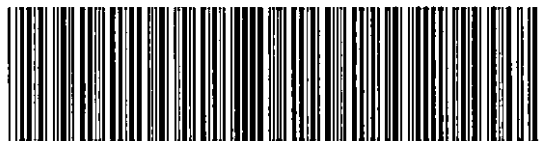
(Document Number)

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2018 AUG -1 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend/CC

AUG 02 2018
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Police Athletic League of Jacksonville, Inc.

DOCUMENT NUMBER: 723394

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

Please return all correspondence concerning this matter to the following:

Kathleen Harrison

(Name of Contact Person)

Police Athletic League of Jacksonville, Inc.

(Firm/ Company)

P.O. Box 351060

(Address)

Jacksonville FL 32235

(City/ State and Zip Code)

Kathleen.Harrison@jaxpal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Harrison

904

854-6555 x 307

at

(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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2018

KATHLEEN HARRISON
POLICE ATHLETIC LEAGUE
P.O. BOX 351060
JACKSONVILLE, FL 32235

SUBJECT: POLICE ATHLETIC LEAGUE OF JACKSONVILLE,
INCORPORATED
Ref. Number: 723394

We have received your document for POLICE ATHLETIC LEAGUE OF JACKSONVILLE, INCORPORATED and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 218A00014850

RECEIVED
13 AUG -1 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

Police Athletic League of Jacksonville, Inc.

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

723394

(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)

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

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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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

FILED
2018 AUG -1 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 type="checkbox"/> Change	P	Stephen Vining	4248 San Jose Blvd.
<input type="checkbox"/> Add			Jacksonville FL 32207
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	Alex Alston	300 A. Philip Randolph Blvd.
<input checked="" type="checkbox"/> Add			Jacksonville FL 32203
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	VP	Joshua Roberts	50 N Laura St.
<input type="checkbox"/> Add			Jacksonville FL 32202
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	VP	Stephen Crooks	2827 Ridgefield Ct.
<input checked="" type="checkbox"/> Add			Jacksonville FL 32257
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	ST	Diana Wendland	501 E. Bay St.
<input type="checkbox"/> Add			Jacksonville FL 32202
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	T	DudleyMendheim	10125 Vineyard Lakes Rd. E.
<input checked="" type="checkbox"/> Add			Jacksonville FL 33256
<input type="checkbox"/> Remove			

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change		Victor Cora	11478 Elaine Dr.
<input type="checkbox"/> Add			Jacksonville FL 32218
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	Ywana Allen	12740 Cool Water Way
<input checked="" type="checkbox"/> Add			Jacksonville FL 32246
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>D</u>	Jennifer Snow	2129 Saint Martins Dr. E.
<input checked="" type="checkbox"/> Add			Jacksonville FL 32246
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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

Effective date if applicable: 7/1/18
(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 7/1/2018

Signature

Lakesha Burton

(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)

Lakesha Burton

(Typed or printed name of person signing)

CEO

(Title of person signing)