726167

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COVER LETTER

TO: Amendment Section Division of Corporations

SUN COAST POI NAME OF CORPORATION:	LICE BENEVOLENT A	ASSOCIATI	ON, INC.		
726167 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are su	abmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
SASHA LOHN, ESQ.					
	(Name of Contact Po	erson)			_
SUN COAST POLICE BENEVOLENT ASSOCIA	ATION, INC.				
	(Firm/ Company	·)			_
14141 46TH STREE N., SUITE 1205					
	(Address)				_
CLEARWATER, FL 33762					
	(City/ State and Zip	Code)	ati arg	_	
OFFICE@SUNCOASTPBA.COM					
E-mail address: (to be u	sed for future annual rep	ort notificat	ion)		-;
For further information concerning this matter, plea	ase call:				, <u> </u>
SASHA LOHN, ESQ.	nt.	727			2
(Name of Contact Pers		(Area Code	e) (Daytime Teleph	one Number)	:- :-
Enclosed is a check for the following amount made	e payable to the Florida	Department	of State:		
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu		Cer is Cer (Ac	2.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	n	÷
Mailing Address Amendment Section Division of Corporations	Ai Di	reet Address nendment Sovision of Co	ection		

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SUN COAST POLICE BENEVOLENT ASSOCIATION, INC.

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726167	
(Document Nun	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stati mendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	<u>ration:</u>
N/A	The new
name must be distinguishable and contain the word "corpo Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	N/A
Principal office address MUST BE A STREET ADDRES	<u></u>
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the
new registered agent and/or the new registered office	e address:
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
-	(City) (Zip Code)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ed Agent: Compiler with and account the obligations of the position
rereoy accept the appointment as registered agent. I am	Jaminar with and accept the conganons of the position.

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: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>Secretar</u> y	GREGORY SHONE	14141 46TH ST N, SUITE 1205 CLEARWATER, FL 33762
X Remove 2) Change Add	Secretary	CHRISTOPHER JONES JR.	14141 46TH ST N, SUITE 1205 CLEARWATER, FL 33762
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or ac (attach additional s	Iding additional A sheets, if necessary	articles, enter change(s) here:). (Be specific)	
N/A			

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The date of each amendment date this document was signed	(s) adoption:				, if other than the
Effective date if applicable:	SEPTEMBER 8, 2023				
Effective date in applicable:	(no more than	90 days after amend	lment file date)	·	
Note: If the date inserted in th	is block does not meet the	annlicable statutory	filing requirement	s, this date will not	be listed as the

<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.

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were poard of directors.
Dated	OCTOBER 5, 2023
Signatu	re
S.g.i.i.i	(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) JONATHAN VAZQUEZ
	PRESIDENT Title of person signing)