## 735332

(Red	questor's Name)	
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·	COVER LETTER	<u> </u>		
TO: Amendment Section Division of Corporations				
San Marco Preservation				
735332 DOCUMENT NUMBER:				_
The enclosed Articles of Amendment and fee are submitte	ed for filing.			
Please return all correspondence concerning this matter to	the following:			
Shelley Gill Cain				
(Na	nme of Contact Per	rson)		-
San Mareo Preservation Society, Inc.				
	(Firm/ Company)	)		_
1468 Hendricks Avenue				
	(Address)			_
Jacksonville, Florid 32207				
(Cil	ty/ State and Zip C	Code)		
shelleycain@yahoo.com				· · · ·
E-mail address: (to be used for	future annual repo	ort notification	))	, ·
For further information concerning this matter, please call	1:			١
Shelley Gill Cain	at	904	910-9063	- 
(Name of Contact Person)	ut _	(Area Code)	(Daytime Telephone Number)	· . 
Enclosed is a check for the following amount made payab	ble to the Florida D	Department of 1	State:	-
Certificate of Status (	643.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certifi c Certifi	) Filing Fee cate of Status ed Copy ional Copy is sed)	

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

. .

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation (if known)

San Marco Preservation Society, Inc.

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

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735332

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. If amending name, enter the new name of the corpor	ation:		
\$/A			The new
ame must be distinguishable and contain the word "corpo Company" or "Co." may not be used in the name.	ration" or "incorpore	ited" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	N/A <u> S</u> )		
2. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	N/A		
. If amending the registered agent and/or registered o		da, enter the name of the	
<u>new registered agent and/or the new registered offic</u> <u>Name of New Registered Agent</u> : <u></u>	<u>e address:</u>		, ,
	· · · · · · · · · · · · · · · · · · ·	(Florida street address)	,
<u>New Registered Office Address:</u>			
		, Florida	
	(Citv)	(Zip Code)	

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mi</u>	<u>m Doe</u> <u>ke Jones</u> Iv Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	David Paulk	1468 Hendricks Avenue Jacksonville, Florida 32207
Remove 2) Change	<u>T</u>	Matt Stupski	1468 Hendricks Avenue
X Add Remove	S	Michelle Lang	Jacksonville, Florida 32207         1468 Hendricks Avenue         Jacksonville, Florida 32207
X Add Remove			
4) Change Add × Remove	<u>h</u>	Lauren Carlucci	1468 Hendricks Avenue           Jacksonville, Florida 32207
5) Change Add	<u>T</u>	Mack Volk	1468 Hendricks Avenue Jacksonville, Florida 32207
X Remove	ነቦቦ	Desiree Bailey	1468 Hendricks Avenue
Add <u>x</u> Remove	<u></u>	<u></u>	Jacksonville, Florida 32207
F. If amending or ad	dine additional	Articles, enter change(s) here:	

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

<u>N/A</u>

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The date of each amendment date this document was signed		if other than the
Effective date <u>if applicable</u> :	September 15, 2023 (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	December 6, 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)

David Paulk

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(Typed or printed name of person signing)

President

(Title of person signing)