(Re	questor's Name)	
(Add	dress)	_
(Ade	dress)	
(Cit	y/State/Zip/Phone	e #)
•	,	,
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
(20	coment rumber,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
'	Ū	
		ŀ

Office Use Only



900350037649

00/13/25-HB1006-HB1 (***,76.15)

SEP 3 0 2020 IALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

FLORIDA CPA PO NAME OF CORPORATION:	OLITICAL ACTION (COMMITTEE,	INC.
740321 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	ter to the following:		
Donna M. Son			
-	(Name of Contact Pe	erson)	
Florida Institute of Certified Public Accountants			
	(Firm/ Company	·)	
3800 Esplanade Way, Suite 210			
	(Address)	<u> </u>	
Tallahassee, FL 32311			
	(City/ State and Zip (Code)	
sherri@ficpa.org			
E-mail address: (to be use	d for future annual rep	ort notification	n)
For further information concerning this matter, please	e call:		
Donna M. Son	at	850	224-2727 x310
(Name of Contact Person	at 1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida l	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	Filing Fee cate of Status led Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations	An	reet Address nendment Secti vision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment tion

	เข
	Articles of Incorporation
	of
FLORIDA CPA POLITICAL	ACTION COMMITTEE, INC.
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
740321	
	(12 annual Name Comment)

	Articles of Amendment to Articles of Incorporation of	
FLORIDA CPA POLITICAL ACTION COMMI	TTEE, INC.	(i)
(Name of Corporation as currently filed with the 740321	ne Florida Dept. of State)	
(Docu	ment Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Cor	
A. If amending name, enter the new name of th	ne corporation:	
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam		The new reviation "Corp " or "Inc "
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		_
D. If amending the registered agent and/or reginew registered agent and/or the new register		ame of the
Name of New Registered Agent	Donna M. Son	
Mane of New Newslevel Agent	3800 Esplanade Way, Suite 210	
<u>New Registered Office Address</u>	el bando su ver ado	(es)
	Tallahassee, FL	. Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager		ns of the position
	D500	

Mgnature 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: X Change X Remove A Add	PT John I. V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>st</u>	Deborah L. Curry	3800 Esplanade Way, Suite 210 Tallanassee, FL 32311
2) Change Add	ST	Justin A Thames	3800 Esplanade Way, Suite 210 Tallahassee, FL 32311
Remove 3) × Change Add Remove	<u>P</u>	Joseph A Epstein	301 E Las Olas Blvd, 4 Floor Ft. Lauderdale, FL 33301
4) <u>* Change</u> Add	<u>v</u>	Sheldon F Bernau	125 W Romana St. STE 224 Pensacola, FL 32502
Remove 5)ChangeAddRemove			
6) Change Add			
E. If amending or add (attach additional sho	eets, if necessary).	ticles, enter change(s) here: (Be specific)	
		 -	

	.
	
	
	<u> </u>
	_ _ _
	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date if applicable: (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 need document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	

■ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s)

was/were sufficient for approval.

E. If amending or adding additional Articles, enter change(s) here:

Article V:

- · Current Directors were updated
- The following changes were made:
 - Additional <u>and successor</u> directors of the corporation shall be elected as set forth in the corporation's by-laws and shall serve until their successors are <u>elected</u> <u>determined as</u> <u>provided in the by-laws of the corporation.</u>

Article VII:

- Corporation address was changed to 3800 Esplanade Way, Suite 210, Tallahassee, Florida 32311
- Registered agent name was changed to <u>Donna Son</u>

Dated8/7/20
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)
Justin A Thames
(Typed or printed name of person signing)

(Title of person signing)