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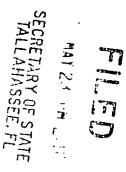
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Friends of the Dunnellon Public Lib
DOCUMENT NUMBER: 756346
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Linda Hall, President (Name of Contact Person)
The Friends of the Dunnellon Public Library
5690 SW 176 Ave (Address)
Dunnellon FL 34434 (City/ State and Zip Code)
hall 3118@bellsouth.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda Hall at (352) 465-5039 (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:
S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILED

Articles of Amendment

to

- MAY 23 (A) (2.57)

Articles	of Incorporation	
	of .	SECRETARY OF STATE
The Friends of the Du	innellon	PUBLICALLAHABAFFIFLING
Name of Corporation as currently filed with the Florida D	ept. of State)	1001 S 210 Clay, 2
11 -11/		
doc # 756346	er of Corporation (if kr	
(Document Numbe	er of Corporation (if kr	lown)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:	
N/A		The new
name must be distinguishable and contain the word "corporate	ion" or "incorporated	" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	·	
n n	N)/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_ '\//-\	
Tracqua office address prost be A Street ADDRESS)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY RE A POST OFFICE BOX)	N/A	
	··	
 If amending the registered agent and/or registered office 	e address in Florida,	enter the name of the
new registered agent and/or the new registered office ac	ddress:	
Name of New Registered Agent:	N/A	
Name of New Registered Agent.		
March wintown d Office Address	(F)	orida street address)
New Registered Office Address:	۱1/۸	
	N/A	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am far	Agent: miliar with and accept	the obligations of the position.
	N/A	
Si	gnature of New Regist	ered 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 X Add	PT John I V Mike SV Şally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add		Diana Quinn	8967 SW 194 Ct Dunnellon FL 34432
Remove 2) Change Add		Cheryl Murdock	13870 SW 112th St Dunnellon FL 34432
Remove 3) Remove Add Remove		Kathleen Wallace Dawne	20921 SW 36th St Dunnellon FL 34431
4) Change X Add	T	Shaine Mobley	10715 SW 186 Ave Dunnellon FL 34432
Remove 5) Change Add			
Remove 6) Change Add	~		
Remove			
E. If amending or additional she	eets, if necessary).	ticles, enter change(s) here: (Be specific)	
		11.11.00.04	

			
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	/ a		
The date of each amendment(s) adoption date this document was signed.	. <u>N/A</u>		, if other than the
Effective data if applicable:	1/3/2002		
date this document was signed. Effective date if applicable: 5	to more than 90 days after a	mendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statu it of State's records.	ntory filing requirements, this	date will not be listed as the
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.

П	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 5/20/2022
	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)
	Linda Hall
	(Typed or printed name of person signing)
	President
	(Title of person signing)