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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		SOCIATION OF CC	———	SEMENT, INC.	
DOCUMENT NUMBER:	N00000003204				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
SHELLEY SARROS					
		(Name of Contact Pe	erson)		
GOLD COAST ASSOCIA	ATION OF CODE ENFO	RCEMENT, INC.			
		(Firm/ Company	′)	• • •	
P.O. BOX 534					
		(Address)		•	
HALLANDALE BEACH, I	FL 33009				
		(City/ State and Zip (Code)		
SSARROS@COHB.ORG	3				
<u>-</u> I	-mail address: (to be used	for future annual rep	ort notification	1)	
For further information con-	cerning this matter, please	ecall:			
SHELLEY SARROS		at	954	205-8836	
	(Name of Contact Person			(Daytime Telephone Number)	
Enclosed is a check for the	following amount made pa	ayable to the Florida I	Department of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif s Certif	Difiling Fee icate of Status ied Copy tional Copy is ised)	
Mailing / Amendme	Address ent Section		reet Address nendment Secti	ion	

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

Articles of Amendment to Articles of Incorporation of

GOLD COAST ASSOCIATION OF CODE ENFORCEMENT, INC.

(Name of Corporation as currently filed with the FI	orida Dept. of State)
N0000003204	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:
	The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	DRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	
Name of New Registered Agent:	
_	(Florida street address)
New Registered Office Address:	II torage street mareens
_	, Florida
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered 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: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) _X Change Add Remove	<u>p</u>	KIMBERLEY SIBNER	1601 NW 136 AVE BLDG A SUNRISE, FL 33323
2) Change Add	<u>s</u>	JILL LACERRA	1 N UNIVERSITY DR PLANTATION, FL 33324
X Remove 3) Change Add Remove			CLEARVENS J BAPTISTE
4) Change Add			
Remove 5)ChangeAddRemove			
6) Change Add			
E. If amending or addin (attach additional shee		icle <u>s, enter change(s) here</u> : (Be specific)	
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The date of each amendment(s) adoption: _date this document was signed.				, if other than the
Effective date if applicable:	03-16	-2020 er amendment file date)		
Note: If the date inserted in this block does n			its, this date will not	be listed as the
document's effective date on the Department	of State's records.			
Adoption of Amendment(s) (C	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 03-/2-2020
	Signature Shelley Summy
•	(By the chairman or vior 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)
	Shelley SARROS
	Typed or printed name of person signing)
	TREASURER - REGISTER & AGENT (Title of person signing)