

NOO671

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NAMI MARTIN COUNTY, INC

DOCUMENT NUMBER: N00671

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathleen Murphy Smith
(Name of Contact Person)

NAMI MARTIN COUNTY, INC
(Firm/ Company)

101 SE Central Parkway
(Address)

Stuart Florida 34994
(City/ State and Zip Code)

kathleen@namimartincounty.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen Murphy Smith 772 834-4937
at
(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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

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

Street Address
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

23
33 11 PM 55

NAMI MARTIN COUNTY, INC

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

N00671

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NAMI TREASURE COAST FL, INC

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Kathleen Murphy Smith

19 Banyan Road

(Florida street address)

New Registered Office Address:

Stuart

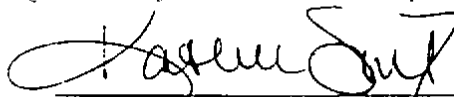
(City)

Florida 34996

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
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1) <input type="checkbox"/> Change	<u>T</u>	<u>John Hockey</u>	<u>2600 S Kanner Hwy Apt X12</u>
<input checked="" type="checkbox"/> Add			<u>Stuart, FL 34994</u>

☐ Remove

2) <input type="checkbox"/> Change	<u>S</u>	<u>Ryan Losco</u>	<u>4734 SW Briarwood Ct.</u>
<input checked="" type="checkbox"/> Add			<u>Stuart, FL 34997</u>

☒ Remove

3) <input type="checkbox"/> Change	<u>V</u>	<u>Emily Seitter</u>	<u>995 NE Rio Pine Lane</u>
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☐ Add

☐ Remove

4) <input type="checkbox"/> Change	<u>T</u>	<u>Jennifer Carter</u>	<u>2173 SE Fern Park Drive</u>
<input type="checkbox"/> Add			<u>Port St Lucie, FL 34952</u>

☒ Remove

5) <input type="checkbox"/> Change	<u>S</u>	<u>Kirsten Chism</u>	<u>3262 NE Spinnaker Way</u>
<input type="checkbox"/> Add			<u>Jensen Beach, FL 34957</u>

☒ Remove

6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			

☐ Remove

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

(attach additional sheets, if necessary). (Be specific)

☒ 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 November 14th, 2023

Signature Janice Greller
(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)

Janice Greller
(Typed or printed name of person signing)

Janice Greller Executive Director
(Title of person signing)