## N03000000392

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Dolphin Conservations:	on Center, Inc.			
DOCUMENT NUMBER:	N02000000392				
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:			
Karin Appling					
		(Name of Contact Person	1)		_
Jacoby Development Inc.					
-		(Firm/ Company)	<del></del>	<u>.                                    </u>	
8200 Roberts Drive, Suite 2	00				
		(Address)			
Atlanta, GA 30350					
<u> </u>		(City/ State and Zip Code	e)		
kappling@jacobydevelopm	ent.com				
l:	-mail address: (to be use	d for future annual report	notification)		
For further information cond	erning this matter, please	e call:			
Karin Appling		40 <sup>2</sup> at	4-399 <b>-</b> 993C	2022 D SECR TAL	⇔गन्ग
	(Name of Contact Persor	(Aı	ea Code) (Daytime Tel	ephone Number)	7 1
Enclosed is a check for the f	ollowing amount made p  ☐\$43.75 Filing Fee &  Certificate of Status		□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	21:15 PM 1:15	

**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

Dolphin Conservation Center, Inc.				
(Name of Corporation as currently filed with the Florida D	ept. of State)			
N02000000392				
(Document Number	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corp</i> o	oration adopts the	e follow	ring
A. If amending name, enter the new name of the corporati	on:			
			The n	ew
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbr	eviation "Corp."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
(Principal office address <u>MOST BE A STREET ADDRESS</u> )	· ·			
	<del></del> :		_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
		<del></del>		
			<del>-</del>	
		<del></del>		_
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office agent.		me of the		
	<u></u>	(n	20	
Name of New Registered Agent:		<del></del>	2 <b>7</b> D	—- —-
	(Florida street addr			- PILLER E
New Registered Office Address:	(Fibrial Sireet adar)	: 37 ± 5 ± 5 ± 5 ± 5 ± 5 ± 5 ± 5 ± 5 ± 5 ±	9	]
		्र Florida <u>के लि</u>		\$ \$
<del></del>	(City)	(Zip Code)		سريها آ
New Registered Agent's Signature, if changing Registered	Agent:	17 i j	S	
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligation	is of the position.		
~~~	CM D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	' . l		_
Sig	gnature 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 X Add	PT         John I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change  X Add	<u>D</u>	Frank Williams	5301 Riverview Drive St. Augustine, FL 32080
Remove			
2) Change Add	<u>D</u>	Gregory Bossart	9601 Oceanshore Blvd Marineland, FL 32080
x Remove 3) Change Add Remove	<u>D</u>	Richard Linnehan	9601 Oceanshore Blvd Marineland , FL 32080
4) Change Add		<u>.                                    </u>	
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or addit (attach additional shee		rticles, enter change(s) here: (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:		_
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be t of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

Dated	December 13, 2022
Dated _	0. 20. 1.
Signature _	Amer I WIN
Ì	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)
	James F. Jacoby
	James F. Jacoby  (Typed or printed name of person signing)