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C. GOLDEN AUG - 7 2019

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: First Coast Crime Stoppers, Inc.
DOCUMENT NUMBER: <u>№0 2-0000</u> 5324
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cathy Gaiding (Name of Contact Person)
(Name of Contact Person)
First Coast Crime Stoppers Inc. (Firm/Company)
(Firm/ Company)
P.O. Box 47875
(Address)
Vacksonuille, FL 32247-7875 (City/ State and Zip Code)
(City/ State and Zip Code)
Cathy @ feerimestoppers com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person)  (Name of Contact Person)  (Name of Contact Person)  (Name of Contact Person)  (Area Code)  (Daytime Telephone Number)
(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:
\$35 Filing Fee

Mailing Address
Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

Street Address

Amendment Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



01		
Crime Stopper	s, Inc.	2019 AUG - 1 PM
		· · · · · · · · · · · · · · · · · · ·
005224		Ċ
nt Number of Corporation (if k	nown)	
la Statutes, this <i>Florida Not Fo</i>	r Profit Corporation	adopts the following
corporation:		
		The new
'corporation" or "incorporated	l" or the abbreviatio	n "Corp." or "Inc."
le: N/A		
<u>DRESS</u> )		
$\underline{\partial X}_{i}$ $\underline{\partial Y/A}$		
ered office address in Florida,	enter the name of t	h <u>e</u>
NIA		
, ,		
(F.	orida street oddress)	
	Flori	da
(City)		p Code)
	the obligations of th	e position.
		- <b>/</b>
SY/A		
· · / / 1		
	ered office address in Florida, doffice address:    Coly   A	Crime Stoppers, Inc., securrently filed with the Florida Dept. of State)  O 5 2 3 4  ent Number of Corporation (if known)  da Statutes, this Florida Not For Profit Corporation  corporation:  'corporation' or "incorporated" or the abbreviation  de: N/A  DRESS)  OX)  TV/A   (Florida street address)  (Florida street address)  Flori (City) (Zi, segistered Agent:  I am familiar with and accept the obligations of the

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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add Remove		_		
2) Change		_		
Remove 3 ) Change Add				
Remove 4) Change		_		
Add				
5) Change Add		_		
Remove 6) Change		_		
Add Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
(and chadamonal sheets, y necessary). (be specyle)
ARTICLE VII - OFFICERS
The officers shall consist of a Chairman,
Vice-Chairman, Secretary, and Treasurer. Other
officers may be authorized and elected pursuant
to the By-laws. The duties of the officers
Shall be set forth in the Ry-laws.
<del></del>

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The date of each amondment (a) ad		July	, ,	2010		
The date of each amendment(s) addate this document was signed.	option:	<u> </u>		<u> </u>		_, if other than the
Effective date if applicable:						
	(no more	than 90 days aft	er amena	lment file date)		
Note: If the date inserted in this bloc document's effective date on the Dep			statutory	filing requirements	s, this date will not b	oe listed as the
Adoption of Amendment(s)	(CHEC	K ONE)				
The amendment(s) was/were adwas/were sufficient for approval	opted by the me l.	embers and the n	umber of	votes cast for the	amendment(s)	
☐ There are no members or memb adopted by the board of directo		ote on the amend	dment(s).	The amendment(	s) was/were	
Dated 7	35-19	<u> </u>				
Signature	<u> </u>	1/2		,		
haye,not bee	n selected, by a	irman of the boa in incorporator – ary by that fiduc	if in the l	ent or other office nands of a receiver	r-if directors trustee, or	_
	<u> </u>	OXEV Typed or printed	ZQ name of	person signing)		
	-ac 5	Box 0	of person	haigred	<u> </u>	
		Cittle	or beigon	raigimig <i>j</i>		