

NO30000009730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

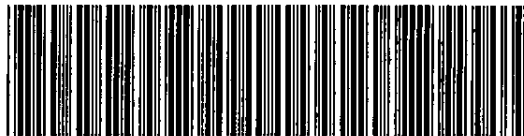
(Business Entity Name)

(Document Number)

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FILED

2010 MAR 22 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

MAR 24 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Treasure Coast Council of Local Governments

DOCUMENT NUMBER: N03000009730

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

Please return all correspondence concerning this matter to the following:

Dowling Watford
(Name of Contact Person)

City of Okeechobee
(Firm/ Company)

701 NE 5th Street
(Address)

Okeechobee, Florida 34972
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Dowling Watford at (863) 763-0513
(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 checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

The Treasure Coast Council of Local Governments

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

#N03000009730

(Document Number of Corporation (if known))

FILED
2010 MAR 22 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

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:

Faye W. Outlaw, MPA

New Registered Office Address:

2300 Virginia Ave.

(Florida street address)

Ft. Pierce, Florida

(City)

Florida 34982
(Zip Code)

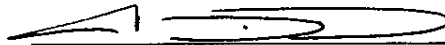
New Registered Agent's Signature, if changing Registered Agent:

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

See Attached

Signature of New Registered Agent, if changing

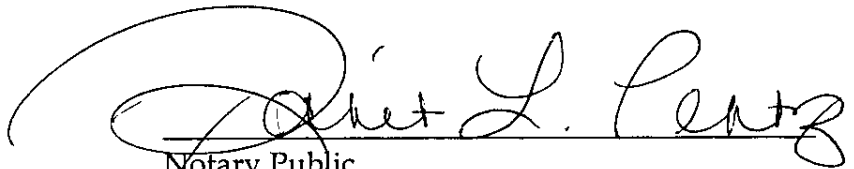
IN WITNESS WHEREOF, I, Faye W. Outlaw, having been named Registered Agent and to accept service of process for the Treasure Coast Council of Local Governments, Inc. at the place designated in these Articles of Incorporation, hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent this 11th day of March, 2010.



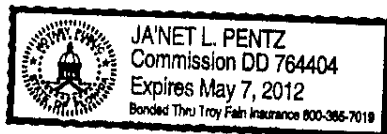
Faye W. Outlaw, MPA, County Administrator
St. Lucie County, Florida
Registered Agent

STATE OF FLORIDA)
)
COUNTY OF ST. LUCIE)

The foregoing instrument was acknowledged before me this 11th day of March, 2010 by Faye W. Outlaw, who is personally known to me or showed me identification by means of a _____ and who did take an oath.



Notary Public
State of Florida



Printed Name: Ja'net L - Pentz

Commission No.: DD 764404

My Commission Expires: May 7, 2012

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Corrected ARTICLE VII : (MEMBERS): ADD "School Board Officials"

Anderson County Administrator TO: "Faye Outlaw, MPA, County Administrator"

The date of each amendment(s) adoption: _____

2/3/2010
(date of adoption is required)

Effective date if applicable: 02/03/2010

(no more than 90 days after amendment file date)

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.

☐ 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 02/03/2010

Signature

James A. Christie, Jr.

(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 A. Christie, Jr.

(Typed or printed name of person signing)

Chairman

(Title of person signing)