

N06 000 003355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

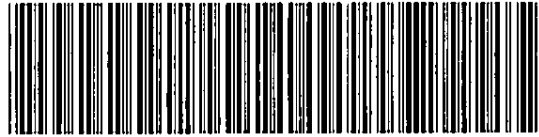
(Business Entity Name)

(Document Number)

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2024 DEC 26 AM 11:01

CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

2024 DEC 26 PM 3:48

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AB

**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

**incserv**

**ORDER FORM**

**TO:** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM:** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE:** 12/26/2024

**PRIORITY:** Regular Approval

**OUR REF.# (Order ID#):** 1334298

**ORDER ENTITY:**

SOUTH FLORIDA PUBLIC MEDIA COMPANY

**PLEASE PERFORM THE FOLLOWING SERVICES:**

SOUTH FLORIDA PUBLIC MEDIA COMPANY (FL)

File the attached amendment

**NOTES:**

\$35.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** SOUTH FLORIDA PUBLIC MEDIA COMPANY

**DOCUMENT NUMBER:** N06000003355

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

Please return all correspondence concerning this matter to the following:

Jermaine Allen

(Name of Contact Person)

Shutts & Bowen LLP

(Firm/ Company)

525 Okeechobee Blvd. Ste. 1100

(Address)

West Palm Beach, FL 33401

(City/ State and Zip Code)

Jallen@shutts.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jermaine Allen

561

650-8554

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

SOUTH FLORIDA PUBLIC MEDIA COMPANY

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

N06000003355

(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:

\_\_\_\_\_ 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:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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2024 DEC 26 AM 11:01

DEPT. OF STATE  
TALLAHASSEE, FL

**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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change <u>    </u> Add	<u>D</u>	<u>Lydia Harrison</u>	<u>109 4th Rivo Alto Terrace</u> <u>Miami Beach, FL 33139</u>
<u>X</u> Remove			
2) <u>    </u> Change <u>    </u> Add	<u>D</u>	<u>Prahasi Kacham</u>	<u>Fidelity Investments</u> <u>2641 N. Flamingo Road Unit 606N</u>
<u>X</u> Remove			<u>Sunrise, FL 33323</u>
3) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>D</u>	<u>Danny Espino</u>	<u>School Board Member - District 5</u> <u>1450 NE 2nd Avenue</u> <u>Miami, FL 33132</u>
4) <u>X</u> Change <u>    </u> Add <u>    </u> Remove	<u>S</u>	<u>Darren Stokes</u>	<u>EVP Human Resources</u> <u>14500 West Flagler Street</u> <u>Sunrise, FL 33323</u>
5) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>D</u>	<u>Nikki Setnor</u>	<u>10200 Sunset Drive</u> <u>Miami, FL 33173</u>
6) <u>    </u> Change <u>    </u> Add <u>X</u> Remove	<u>D</u>	<u>Monica Colucci</u>	<u>School Board Member - District 8</u> <u>1450 NE 2nd Avenue</u> <u>Miami, FL 33132</u>

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

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

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**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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change ___ Add  ___ Remove	<u>C</u>	<u>Richard Rampell</u>	<u>1186 North Ocean Way</u> <u>Palm Beach, FL 33480</u>
2) <u>X</u> Change ___ Add  ___ Remove	<u>VC</u>	<u>Cheryl Wilke</u>	<u>Lewis Brisbois</u> <u>110 SE 6th Street Suite 2600</u> <u>Ft Lauderdale, FL 33301</u>
3) <u>X</u> Change ___ Add ___ Remove	<u>D</u>	<u>Joseph Goldstein</u>	<u>Shutts &amp; Bowen LLP</u> <u>200 S. Broward Blvd. Suite 2100</u> <u>Ft Lauderdale, FL 33301</u>
4) ___ Change ___ Add  <u>X</u> Remove	<u>D</u>	<u>Michael Hernandez</u>	<u>LSN Communications</u> <u>3800 NE 1st Ave., Suite 200</u> <u>Miami, FL 33137</u>
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)*

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☐ 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

Dec 23, 2024

Signature

Sheila C. Reinken

(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)

Sheila Reinken

(Typed or printed name of person signing)

Chief Operating Officer

(Title of person signing)