N 07000001758

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SECRETARY OF STATE
TALLAHASSEE, FLORIO

N.C. C.COULLIETTE MAY 1 8 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Florida CPTE	Network, Inc.	
DOCUMENT NUM	BER: N07000001758		
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
	<u></u>	an P. Ajoc	
	(Name of	Contact Person)	
		f St. Petersburg	
	(Firm	/ Company)	
	P.O.	Box 2842	
	(2	Address)	
	St. Peters	burg, FL 33731	<u> </u>
	(City/Sta	te and Zip Code)	
	susan.aj E-mail address: (to be use	oc@stpete.org d for future annual report not	ification)
For further information	on concerning this matter, pleas	e call:	
Susan P. Ajoc		at (727) 893-	7356
(Name	of Contact Person)	(Area Code & Da	aytime Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departi	ment of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$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 of Corporation Building 2661 Executive Corporation Full Corporation Street Corporation Street Corporation Street Corporation Street Address Street Street Address Street	enter Circle

Articles of Amendment Articles of Incorporation of

Florida CPTED Network, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

N07000001	758		
(Document Number of Con	poration (if known)		
Pursuant to the provisions of section 617.1006, Florida State he following amendment(s) to its Articles of Incorporation		ofit Corporation a	ıdopts
A. If amending name, enter the new name of the corpo	oration:		
Florida Design Out Crime Asso	ociation, Inc (FLDOCA)		
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." <u>"Company" or "Co." m</u>		rporated" or the	
B. Enter new principal office address, if applicable:		AS O	
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)	CR CR	- metrol
•		- 55 ×	i i
•	· · · · · · · · · · · · · · · · · · ·		S. Carriera
C. Enter new mailing address, if applicable:	·	교육 🚅	Π
(Mailing address MAY BE A POST OFFICE BOX)		S IS	O
		ATE ATE	
			
D. If amending the registered agent and/or registered	office address in Florida, ente	er the name of the	<u>e</u>
new registered agent and/or the new registered offi			
Name of New Registered Agent:		_	
New Registered Office Address:	(Florida street address)	-	
		_, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe	ered Agent:		
I hereby accept the appointment as registered agent. position.	I am familiar with and accept	t the obligations	of the
Signature	of New Registered Agent, if char	noino	

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) <u>Address</u> **Type of Action** Title Title <u>Name</u> ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

Effective date if applicable:	immediate
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated May	7, 2009
Signature _	Susarlmentilles
hav	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, court appointed fiduciary by that fiduciary)
	Susan P. Ajoc
	(Typed or printed name of person signing)
	Chairman
	(Title of person signing)

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