

NO7000004026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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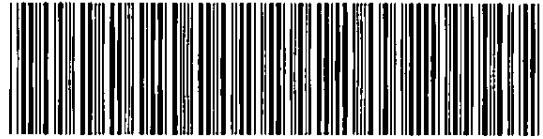
(Business Entity Name)

(Document Number)

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2025 MAY 12 AM 9:55  
SECRETARY OF STATE  
TAL LAMAR

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Identity Theft Resource Center, Inc. \_\_\_\_\_

DOCUMENT NUMBER: N07000004036 \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Mark Brown, Sr. \_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

2101 Vista Parkway, Suite 307 \_\_\_\_\_  
(Address)

West Palm Beach, FL 33411 \_\_\_\_\_  
(City/ State and Zip Code)

m.brown@stampmento.com \_\_\_\_\_  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Brown, Sr. \_\_\_\_\_ 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 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 checked="" 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

2007 MAY 12 AM 9:55  
RECEIVED  
FILING

Articles of Amendment  
to  
Articles of Incorporation  
of

Entity: Thrift Resolution Center, Inc.

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

NC 7000004026

(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:

Student and Athlete Mentoring Program, Inc.

*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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(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:

N/A

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

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	_____	<u>N/A</u> _____	_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

F. If amending or adding additional Articles, enter change(s) here

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

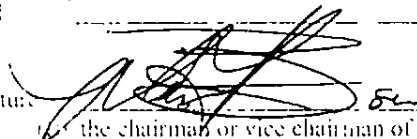
\_\_\_\_\_

\_\_\_\_\_



☐ 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 April 25, 2025

Signature:  \_\_\_\_\_  
(the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator or in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Mark Brown, Sr.

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)