N070000/1677

(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
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PICK-UP	☐ WAIT	MAIL	
	siness Entity Nar	<u></u>	
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Certified Copies	_ Certificates	s of Status	
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Special Instructions to	Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations

LAKEWOOD RANG		1ERGENCY	RESPONSE TEAM, INC.
N07000011677			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
PATRICK R KNOWLES			
	(Name of Contact Pers	son)	· · · · · · · · · · · · · · · · · · ·
LAKEWOOD RANCH COMMUNITY EMERGENO	E RESPONSE TEAM	I, INC.	
	(Firm/ Company)		
11161 E STATE RD 70 STE 115			
	(Address)		
LAKEWOOD RANCH FL 34202			
	(City/ State and Zip Co	ode)	1,11,11,11,11,11,11,11,11,11,11,11,11,1
PAT.KNOWLES@FRONTIER.COM			
E-mail address: (to be used	for future annual repor	rt notification)
For further information concerning this matter, please	call:		
PATRICK R KNOWLES	at	941	254-4052
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida De	partment of S	State:
\$35 Filing Fee \$\sum \text{S43.75 Filing Fee & Certificate of Status}\$		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Street Address Amendment Section		on	
Division of Cornerations	Division of Cornerations		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

LAKEWOOD RANCH COMMUNITY EMERGENCY RESPONSE TEAM, INC.

AND AN BILL AND SEE STATE

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

(Name of Corporation as cu	irrently med with the Fior	ida Dept. of State)
N07000011677	Sumber of Corporation (if kr	
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	·	
A. If amending name, enter the new name of the corp	oration:	
N/A		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporatea	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR.	ESS)	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
But But to be a Warren		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
N/A		
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
	(F.I.	orida street address)
New Registered Office Address:	(4.1)	or and sirect datasets)
N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		the obligations of the position
The state of the s		
	Signature of New Peniet	ered 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 X_Remove X_Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VD	JACK KERBER	7211 ASHLAND GLEN
Add			LAKEWOOD RANCH FL 34202
X Remove			
2) Change	VD	DEBRA DIVEN	6608 NAUTICAL DRIVE
X Add			LAKEWOOD RANCH FL 34202
Remove 3) Change	SD	JOHN FREEMAN	13316 PURPLE FINCH CIRCLE
Add			LAKEWOOD RANCH FL 34202
X Remove			
4) Change	SD	MARILYN KLINE	15701 BUTTERFISH PLACE
X Add			LAKEWOOD RANCH FL 34202
Remove			
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)					
N/A					
			 		
					
					_
				· · · · · ·	.
		<u> </u>			_ .
		<u> </u>			

. N/A	
The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
N/A	
Effective date <u>if applicable:</u> (no more than 90 days after amendment file date)	·
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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 NOVEMBER 30, 2018	
Signature	
(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)	
VICTOR KLINE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	