N11000006976

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2024 OCT 31 PM 2: 58 SECRE ARRY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

MANATEE ECO T	OURISM ASSOCIATION OF CITRUS COUNTY,INC
N11000006976 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Frederick J Herzog, PhD	
	(Name of Contact Person)
Dr Frederick J Herzog, PhD LLC	
	(Firm/ Company)
368 W. Cobblesone Loop	
	(Address)
Hernando, FL 34442	
	(City/ State and Zip Code)
drfrederickjherzog@gmail.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se calt:
Frederick J Herzog, PhD	847-899-9000
(Name of Contact Perso	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	

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

2024 OCT 31 PM 2: 58 SECRETARY OF STATE TALLAHASSEF, FL

Section 1

Articles of Amendment Articles of Incorporation

MANAEE ECO TOURISN ASSOCIATION OF CIRUS COUNTU, INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N11000006976	
(Document Number of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts amendment(s) to its Articles of Incorporation:	the following
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 "Company" or "Co." may not be used in the name.	." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_
Timequi office duaress Biost DD 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:	
new registered agent and/or the new registered office address.	
Name of New Registered Agent:	
(Florida street address)	
New Registered Office Address:	
, Florida	
(City) (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	n.

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: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Robin Gelinas	134 N E 3rd Street Crvsal River, FL34429
Remove 2) Change Add	VP	Ronald Ross	15320 Bailey Rd Brooksville, FL34461
Remove Change Add Remove	<u>s</u>	Lean Williams	4660 N Remington Terr Hernando, FL 34442
4) Change Add	<u>r</u>	Peter Weber	1 SW 1st Place Crystal River, Florida 34429
Remove 5) Change Add Remove			
6) Change Add			
(attach additional)		l Articles, enter change(s) here: (ry). (Be specific)	SEGNALLA
None			31 PH ARN OF HASSEE
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				18				
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		10-28-24						
The date of each amendment date this document was signed		ı:		<u></u>			, if other	than the
	None					3	20Z SE	
Effective date if applicable:		no more than	90 days after o	amendment file	date)		2024 OCT SECS 73	
Note: If the date inserted in the document's effective date on the Adoption of Amendment(s)	nis block doe:	s not meet the	applicable stat	tutory filing rec	quirements, t	this date will	>=: not be listed a	is the
document's effective date on t	he Departme	nt of State's re	cords.	_		J.	5⊰ — ≥c> —	8
Adoption of Amendment(s)		(<u>CHECK ON</u>	<u>(E</u>)			۔ ریا د	PM 2: 58	Sucrel Sucrel
The amendment(s) was/w was/were sufficient for ap	vere adopted oproval.	by the member	rs and the num	nber of votes ca	ist for the an	nendment(s)	: 58 AIE	

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

10-23-24

Dated

(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)

(Typed or printed name of person signing)

President

(Title of person signing)

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