

N11000007420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

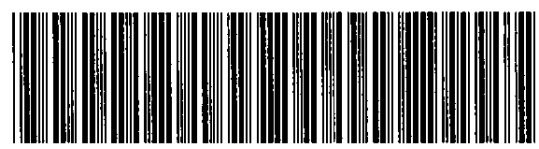
(Business Entity Name)

(Document Number)

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Amend

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 JUN 27 AM 11:21

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TREASURE COAST SWAT, Inc.

DOCUMENT NUMBER: N11000007420

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

Please return all correspondence concerning this matter to the following:

PEDRO SARDINAS
(Name of Contact Person)

Treasure Coast SWAT
(Firm/ Company)

326 NW Curry Street
(Address)

Port Saint Lucie, FL 34983
(City/ State and Zip Code)

tcswat@att.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO SARDINAS at (305) 608-4966
(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 &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JUN 27 AM 11:21

TREASURE COAST SWAT, Inc.

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

N11000007420

(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)

5220 NW Bengal Street
Port Saint Lucie, FL 34983

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

5220 NW Bengal Street
Port Saint Lucie, FL 34983

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: Michael Connor

5220 NW Bengal St
(Florida street address)

New Registered Office Address:

Port Saint Lucie, Florida 34983
(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.

[Signature]
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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>PEDRO SARDINAS</u>	<u>326 NW Curry St</u> <u>Port Saint Lucie, FL</u> <u>34983</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Jill Beebe</u>	<u>3225 Briarbrook Way</u> <u>Palm City, FL 34990</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Jill Beebe</u>	<u>3225 Briarbrook Way</u> <u>Palm City, FL 34990</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Michael Connor</u>	<u>5220 NW Bengal St</u> <u>Port Saint Lucie, FL</u> <u>34983</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Robyn Connor</u>	<u>5220 NW Bengal St</u> <u>Port Saint Lucie, FL</u> <u>34983</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Gabbie Pettiford</u>	<u>5220 NW Bengal St</u> <u>Port Saint Lucie, FL</u> <u>34983</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Amending Address, Officers, and Registered Agent.

The date of each amendment(s) adoption: 7/29/2012

Effective date if applicable: 7/30/2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 7/30/2012

Signature [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)

PEDRO SARDINAS
(Typed or printed name of person signing)

President
(Title of person signing)