

(Requestor's Name)			
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(City/State/Zip/Phone #)			
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S. YOUNG

Articles of Amendment to Articles of Incorporation of

Dixie County Anti-Drug Coalition, Inc.

(Name of Corporation as curre	ently filed with the Florida Dept. of State)		
N11000007477			
(Document Nun	nber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	ates, this Florida Not For Profit Corporation adop	ts the follo	wing
A. If amending name, enter the new name of the corpora	ation:		
		The	new
name must be distinguishable and contain the word "corpor "Company" or "Co," may not be used in the name.	ation" or "incorporated" or the abbreviation "Co	rp." or "L	nc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>)	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			150
(Statung duaress <u>MAT BE A FUST OFFICE BOX</u>)			SEP
		<u>.</u>	10
D. If amending the registered agent and/or registered of			
new registered agent and/or the new registered office	address:	<u> </u>	ι.; Ċi
Name of New Registered Agent:		<u>でい</u> 計	
March 100 100 111	(Florida street address)		
<u>New Registered Office Address:</u>			
	, Florida		
	(City) (Zip Code	e)	
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		tion.	
	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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Coalitio	McCall, Steven Cale	79 NE 121 St.
Add			Cross City, FL 32628
XX Remove			
2) Change	Board S	LaFlam, Melody	79 NE 121 St
Add			Cross City, FL 32628
XX Remove			
3) Change	Board S	Osteen, Nancy	79 NE 121 St
XX Add			Cross City, FL 32628
Remove			
4) Change			
Add			
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)					
(anach adattonal sheets, if necessary).	(Be specific)				
	they are the same of the same				
,					
					
 -					

	date of each amendment(s) adopti	July 31, 2018 on:	_, if other than the
date	this document was signed.		
Effu	etive date <u>if applicable</u> :		-··
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block diment's effective date on the Departr	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
	The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes east for the amendment(s)	
	There are no members or members of adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
	September 6, 2	2018	
	Signature A	una Vangernam	_
	have not been se	or vice chairman of the board, president or other officer-if directors feeted, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	Katrina Van	Aernam	
		(Typed or printed name of person signing)	
	Executive Di	rector	
		(Title of person signing)	