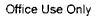
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(Requestor's Name)	
(Address)	
(Address)	<u> </u>
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	tus
Special Instructions to Filing Officer:	
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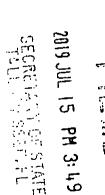




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Articles of Amendment

to

Articles of Incorporation

of

North Florida Police	Motorcycle Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of St	ate)
V/ 1100C	DC 8441	
	r of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corpor</i>	ation adopts the following
A. If amending name, enter the new name of the corporation	on:	
Legacy Law Enforcement Fo	ordation, Inc.	V The new
Legacy Law Enforcement Forname must be distinguishable and contain the word "corporation "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbres	iation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	nla	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		201
C. Enter new mailing address, if applicable:	1	15 PM 3:149
(Mailing address MAY BE A POST OFFICE BOX)	n la	
		<u> </u>
		FE 69
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		<u>e of the</u>
		
Name of New Registered Agent:	·	
	tFlorida street addres	
New Registered Office Address:	ij na ma sircer majaes	,,
		Florida
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam		of the position.
	,	
Sig	mature of New Registered Agent, if c	hanging

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: CEO = 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3.) Change Add			
4) Change Add			
Remove 5)ChangeAdd			
6) Change Add			
Remove			

If amending or adding additional A (attach additional sheets, if necessary)). (Be specific)				
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The date of each amendment(s) adop	ition:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date thment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendme	nt(s)
☐ There are no members or member adopted by the board of directors	s entitled to vote on the amendment(s). The amendment(s) was/we	rre
Dated	77-09-19	
Signature /	0.///	<u> </u>
have not been	in or vice chairman of the board, president or other officer-if direct selected, by an incorporator – if in the hands of a receiver, trustee, pointed fiduciary by that fiduciary)	
	OAVIO SCIALORA (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	