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SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Florida Association of Public Processes	rent Officia.
DOCUMENT NUMBER: N1766	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jaime T. Locklear	
(Name of Contact Person)	
5t. Johns Country BOCC	
(14/m/ Company)	
500 San Sebastian Vicio (Address)	
St. Augustine, FL 32084 (City/State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jaime Lockfear at 904 8143306 (Name of Contact Person) (Area Code) (Daytime Telephone Num	
(Name of Contact Person) (Area Code) (Daytime Telephone Num	iber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee	
Mailing Address Amendment Section Street Address Amendment Section	
Division of Corporations Division of Corporations	

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of

FILED

Florida Association of Rul	olic Procure File 18 18 18 18 STATE
(Name of Corporation as current)	v filed with the Florida Depts-of-State) 10 10 10 10 15 15 15 15
111766	TALLAHASSEE, FL
	of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporatio" (Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable:	500 Sun Sebastiun Vill
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	500 Sun Sebastiun Villo St. Augustine, FL 32084
	,
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 new registered agent and/or the new registered office ad	dress:
Name of New Registered Agent:	o San Sebastian View
500	o San Sebastian View
New Registered Office Address:	(Florida street address)
	Augustine 32084
	Augustine Florida 300 84 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
Thereby accept the appointment as registered agent. I am fan	mar with and accept the obligations of the position.
	since I taxlear
Sis	mature 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X_ Remove		Fatima F. Calkins	8652 Casa VerdeRd Bldg 811 Orlando, FL 32027
2) Add	P	Laurie Victory	1500 Monroe Street 4HL Floor FORL MILES FL 32901
Remove 3)	<u>VP</u>	Theresa Weldo	Fort Myers, FL 33901 5384 100th Ave Pinellas Park, FL 33782
4) <u>X</u> Change Add Remove	T	Jaime T. Lockkar	500 Sun Sebastian View Str Augusting Fl 30084
5) Change Add Remove	<u>5</u>	David Santiago	205 E. Graves Ave Orange City, Fl 32763
6) Change Add Remove			

amending or adding additional Art tach additional sheets, if necessary).	(Be specific)	
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The date of each amendment(s) adoption: July 1, 2018 if other than the 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 does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
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) (Typed or printed name of person signing)
Treasuree (Title of person signing)