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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	Putnam County Sher	iff's Office PAL, Inc		
DOCUMENT NUMBER:	N12000008800			
The enclosed Articles of Am	endment and fee are subr	nitted for filing.		
Please return all corresponde	nce concerning this matte	er to the following:		
Michelle Garner				
		(Name of Contact Po	erson)	_
Putnam County Sheriff's Off	fice PAL. Inc.			
		(Firm/ Company	y)	
130 Orie Griffin Road				
		(Address)		,
Palatka, FL 32177				
		(City/ State and Zip	Code)	
anticrimetaskteam@yahoo.c	om			
E	mail address: (to be used	for future annual rep	ort notification)
For further information conce	erning this matter, please	call:		
Michelle Garner		24	386-329-123	I
	(Name of Contact Person)	at)		(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florida I	Department of S	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee cate of Status led Copy lional Copy is sed)
Mailing A	ddress	Sti	reet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles	of	Incorporation
		of

Putnam County Sh	orriff's Diffice. PAL Inc
(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
N12000008800	1 00 (01)
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:
N/A	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRE	(25)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered offic	<u>ce address:</u>
Name of New Registered Agent: N/A	
	(Florida street address)
New Registered Office Address:	
	, Florida
·	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent
I hereby accept the appointment as registered agent. I an	
	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	PT John Do V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Presiden	Jeff Hardy	130 Orie Griffin Road
Add			Palatka, FL 32177
X Remove			
2) Change	Presiden	Sheriff H.D. "Gator" DeLoach	130 Oric Griffin Road
X Add			Palatka, FL 32177
Remove			
3) Change	Treasure	Kaye Tucker	130 Orie Griffin Road
Add			Palatka, FL 32177
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

N/A						
					 	
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The date of each amendment(s) adopt date this document was signed.	otion:	, if other than the
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 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.	eted by the members and the number of votes cast for the amendment(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/were	
Dated	5/22/17	
Signature	Pary to	_
have not been	on or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
Barry Stew	art	
	(Typed or printed name of person signing)	
Executive I	Director	
	(Title of person signing)	