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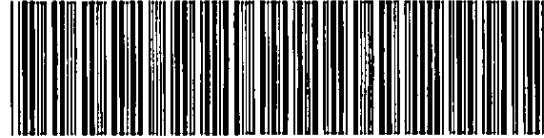
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: The Manatee County Aging Network, Inc.

DOCUMENT NUMBER: N14000011709

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

Please return all correspondence concerning this matter to the following:

Melissa M. Leedom, CPA

\_\_\_\_\_  
(Name of Contact Person)

Secure Aging

\_\_\_\_\_  
(Firm/ Company)

4750 E. State Rd. 64

\_\_\_\_\_  
(Address)

Bradenton, FL 34208

\_\_\_\_\_  
(City/ State and Zip Code)

melissa@secureaging.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa M. Leedom, CPA

941

761-9338

at

\_\_\_\_\_  
(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 checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2021 DEC 13 PM 2:14

The Manatee County Aging Network, Inc.

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

N14000011709

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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:**

Suncoast Aging Network, Inc.

*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)

242 S. Washington Blvd.

Box 271

Sarasota, FL 34236

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

242 S. Washington Blvd.

P.O. Box 271

Sarasota, FL 34236

**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:

Melissa M. Leedom, CPA

4750 E. State Rd. 64

(Florida street address)

New Registered Office Address:

Bradenton

(City)

Florida

(Zip Code)

34208

**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 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>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change <u>X</u> Add	<u>V</u>	<u>Stacey Carlin</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>    </u> Remove			
2) <u>    </u> Change <u>X</u> Add	<u>V</u>	<u>Chazsady Davis</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>    </u> Remove			
3) <u>    </u> Change <u>X</u> Add	<u>T</u>	<u>Melissa M. Leedom, CPA</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>    </u> Remove			
4) <u>    </u> Change <u>X</u> Add	<u>P</u>	<u>Samantha Hersch</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>    </u> Remove			
5) <u>    </u> Change <u>X</u> Add	<u>S</u>	<u>Amy O'Connor</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>    </u> Remove			
6) <u>    </u> Change <u>    </u> Add	<u>AT</u>	<u>Dana Opsines</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<u>X</u> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE III is amended to provide as follows:

The specific purpose for which this corporation is organized is:

IDENTIFY SERVICES FOR THE AGING POPULATION IN THE MANATEE AND SARASOTA COUNTY AREAS;

PROVIDE INFORMATION AND REFERRALS; ANALYZE UNMET NEEDS AND SERVE AS AN ADVOCATE FOR

SOLUTIONS; AND INCREASE PUBLIC AWARENESS OF ELDERLY SERVICES.

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S</u>	<u>Ruth Preisser</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>T</u>	<u>Christine A. Jakusovas</u>	<u>242 S. Washington Blvd.</u> <u>Sarasota, FL 34236</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>          </u>	<u>                                  </u>	<u>                                  </u> <u>                                  </u> <u>                                  </u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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- ☐ 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 12-10-2021

Signature Melissa M. Leedom  
(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)

Melissa M. Leedom, CPA

\_\_\_\_\_  
(Typed or printed name of person signing)

Treasurer

\_\_\_\_\_  
(Title of person signing)