

Oct-15-10

02:56pm

From: Kirk Pinkerton SNNFCO-012320

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# N141041

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
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From: Account Name : KIRK PINKERTON, A PROFESSIONAL ASSOCIATION  
Account Number : 071670002600  
Phone : (941)364-2481  
Fax Number : (941)364-2490

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jshirley@SarasotaArts.org

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 OCT 15 AM 9:16

RECEIVED  
10 OCT 15 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
SARASOTA COUNTY ARTS COUNCIL, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	06
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*Name chg  
CC  
@ 10/18/10*

Electronic Filing Menu

Corporate Filing Menu

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**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION: Sarasota County Arts Council, Inc.**

**DOCUMENT NUMBER: N14641**

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

Please return all correspondence concerning this matter to the following:

Douglas J. Elmore, Esq.  
(Name of Contact Person)

Kirk Pinkerton, P.A.  
(Firm/ Company)

50 Central Avenue, Suite 700  
(Address)

Sarasota, FL 34236  
(City/ State and Zip Code)

jshirley@SarasotaArts.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas J. Elmore, Esq. at ( 941 ) 364-2402  
(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:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

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

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

Sarasota County Arts Council, Inc.

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

N14641

(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:

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 OCT 15 AM 9:16

**A. If amending name, enter the new name of the corporation:**

Arts & Cultural Alliance of Sarasota County, 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**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
(Florida street address)

\_\_\_\_\_, Florida  
(City) (Zip Code)

**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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

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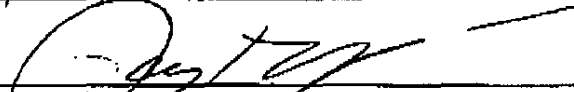
The date of each amendment(s) adoption: October 13, 2010

Effective date if applicable: October 13, 2010  
*(date of adoption is required)*  
*(no more than 90 days after amendment file date)*

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.

Dated 10/13/10

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)*

Dr. Larry Thompson  
*(Typed or printed name of person signing)*

President  
*(Title of person signing)*