## N15000009450

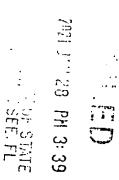
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		."	
Amalgamated Transit	t Union Local 1464, I	nc 	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Stephen K Simon			
	(Name of Contact Per	rson)	<del></del> -
Amalgamated Transit Union Local 1464, Inc.			
	(Firm/ Company)	)	
104 W Country Club Drive			
	(Address)	·	
Tampa FL 33612			
	(City/ State and Zip C	Code)	
stephensimon@tampabay.rr,com.			
E-mail address: (to be used	for future annual rep	ort notification	n)
For further information concerning this matter, please	call:		
Stephen K Simon	at	813	930-0888
(Name of Contact Person	<del></del>		(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable 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)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address  Amendment Section	Am	eet Address endment Sect	
Division of Corporations P.O. Box 6327		rision of Corpo e Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Amalgamated Transit Union Local 1464, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N15000009450 (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: N/A 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. N/A 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: (Florida street address) New Registered Office Address: , Florida (Zip Code) (City) 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:  X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Titlc	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>T</u>	Sandra R Nickles	104 W Country Club Dr Tampa FL 33612
Remove  2) Change	<u>S</u>	Ferraro Jacobs	104 W Country Club Dr Tampa FL 33612
x Remove 3 ) Change Add Remove	<u>S</u>	Genette Keely	104 W Country Club Dr Tampa FL 33612
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
(attach additional shee	ets, if necessary).		
N/A			

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	1/11/21				if ather then the
The date of each amendment(s) adopt	ion:				, if other than the
date this document was signed.					
Effective date if applicable: 1/11/21	(no more than 9		du et 1		
Note: If the date inserted in this block of document's effective date on the Depart	loes not meet the a ment of State's rec	ipplicable statu cords.	itory filing requi	irements, this date w	ill 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 east for the amendment(s) was/were sufficient for approval.

Dated	1/11/21
Dated	10-0
Signature _	Leger Lemon
(Ĥ	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)
	Stephen K Simon
	Stephen K Simon  (Typed or printed name of person signing)