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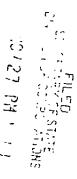
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S. CHATHAM



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Palatka Band Alliance INC
DOCUMENT NUMBER: N 1500009475
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gina Bryant - (Name of Contact Person)
Palatka Band Alliance INC (Firm/Company)
117 moody Lane
Palatka, Fl 30177 (City/ State and Zip Code)
palatkafl band alliance Danail, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gina Bryont at 904 252-4553 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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

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 ot Articles of Incorporation of

Palatka Band A	HighceINC
(Name of Corporation as currently filed with the Florida I	Dept. of State)
N 1500000	<u> </u>
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
n/a	The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	117 moody Lane
(Principal office address MUST BE A STREET ADDRESS	Palatka FI
	<u></u>
C. Enter new mailing address, if applicable:	27
(Mailing address MAY BE A POST OFFICE BOX)	- 11 Moody Lane =:
	Palatka Fl
	38177 ご 詩
	(7)
D. If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a	
Name of New Registered Agent:	na Bryont
	Impody Lane
New Registered Office Address:	(Florida street address)
P	$0.00 \pm 0.00$
<u></u>	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	Agent: miliar with and accept the obligations of the position.
	Brunnt.
Si	gnature 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 D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<b>T</b>	Lisa Sadler- Marshall	9245, State Road 19 Suite I Palatka F13217
2) Change Add	Dic	Joan mccraney	177 CR 309C Palatic FI 3017
Remove 3) Change Add Remove			
4) Change Add	工	Gina Bryant	117 moody Lare Palatka Fl
Remove  5) Change Add	P	Chasity Spoon	3017/ 300 Mellon Rd Palatka F13217)
Remove  6) Change Add	Dit	Fric Stuart	300 mellon Rd Palatka, Fi 32177
E. If amending or add (attach additional sho		ticles, enter change(s) here: (Be specific)	r,
	Q		(J) 27
			PH CONTRACTOR OF THE CONTRACTO
			3. S. M.

		<del></del>
		<del>.</del>
		<del></del>
	****	-
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		•
	-	
The date of each amendment(s) adopti date this document was signed.	on:	, if other than the
		ر ، چ
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	2 2
Note: If the date inserted in this block document's effective date on the Departr	oes not meet the applicable statutory filing requirements, this date will nent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	م المراجعة
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes east for the amendment(s)	温暖

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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 9-13-22
Signature Abrupant
(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)
Gina Bryont. (Typed or printed name of person signing)
Transurer
(Title of person signing)