N15000009782

(Re	equestor's Name)
(Ac	ddress)
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(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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COVER LETTER

TO: Amendment Section **Division of Corporations**

Drug Free Pun NAME OF CORPORATION:	ta Gorda, Corp
N15000009782 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Christine L. Salazar	
	(Name of Contact Person)
Drug Free Punta Gorda, Corp	
	(Firm/ Company)
P.O. Box 510476	
	(Address)
Punta Gorda, FL 33951	
	(City/ State and Zip Code)
chrissie.salazar@yourcharlotteschools.net	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Christine Salazar	941-979-7487
(Name of Contact F	
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of St	
Mailing Address	Stroot Addrose

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

Drug Free Punta Gorda, Corp (Name of Corporation as currently filed with the Florida Dept. of State) N15000009782 (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: 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. 27050 Fairway Dr B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Punta Gorda, FL 33983 C. Enter new mailing address, if applicable: P.O. Box 510476 (Mailing address MAY BE A POST OFFICE BOX) Punta Gorda, FL 33951 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: Christine L. Salazar Name of New Registered Agent: 20519 Albury Dr. (Florida street address) New Registered Office Address: Port Charlotte , Florida 33952 (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; CE() = 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 Y Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	_ <u>v</u>	McCormick, Don	Punta Gorda, FL 33950
x Remove			Punta Gorda, FL 33950
2) Change Add		Pribble, Tony	18500 Murdock Circle Port Charlotte, FL 33948
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption: August 17, 2020	r than the
Effective date if applicable: August 17, 2020	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.	is the
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.	

are no members or members entitled to vote on the amendment(s). The amendment(s) was/were ed by the board of directors.
 August 17, 2020 Dated
Signature Mastin K. Nalagar
(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)
Christine L. SALAZAR
(Typed or printed name of person signing)
CRO-Director
(Title of person signing)