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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Panhandle Track & Field Officials Association	<u>)</u>
DOCUMENT NUMBER: N1600005400	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
William Gilmore (Name of Contact Person)	
3235 Skyview Drive (Address)	
Tallahassee, Florida 32303 (City/State and Zip Code)	···
92 the max a Jahon. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
William Gilmore at 850 528-6460 (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 & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed)	
Mailing Address Amendment Section Street Address Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
-Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Panhandle Track &	Field Officials Association
Name of Corporation as curren N 160000546	tly filed with the Florida Dept. of State)
	er of Corporation (if known)
(Document Numo	er of Corporation (it 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 corporati	ion:
	The new
name must be distinguishable and contain the word "corporal "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:	3235 Skyview Drive
(Principal office address MUST BE A STREET ADDRESS)	3235 Skyview Drive Tallahassee Florida 32303
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3235 Skyview Drive
•	Tallahassee, Florida 32303
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	
. 1	Tilliam Gilmore
_3	235 Skyview Drve (Floridd street address)
New Registered Office Address:	700.5
_10	City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent - I am fa	imiliar with and accept the obligations of the position is
	MIN TO BE TO
	Signature of New Registered Agent, if changing 📅 😘
	TSE SE S
	Page 1 of 4

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 I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	Title W	Name William Gilmor	Addres:
1) _X_ Change Add Remove	CEO	No Change	3235 Skyview Drive Tall, Florida 32303
2) Change Add	<u>V</u>	Lorenzo Wilson	POBOX 3071 Tanahassee, FL 32315
Remove 3) Change Add	<u>S</u>	Sharen Walker	DO Bex 3071 Tallahasse, FL 3085
Remove 4) Change Aḍd	<u>T</u>	Jan Murphy Von Sc	PO Box 3071
Remove 5) Change Add	(FO	Georgette Robinso	Tan, FR. 30315 POBER ZUT
Remove 6) ChangeAdd	T	Sharon Walkers	Tall, FL 32303
Remove		Page 2 of 4	

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.

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Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	\mathcal{D}_{-}	Kelii Smith	3235 Skyview Dr. Tallahassee, FL 3230
Remove			
2) Change Add			
Remove 3) Change Add			2019 JUL -8 PALLAHASSE
Remove 4) Change Add			B FH 3: 37
Remove Change Add			
Remove			
6) Change			
Remove			

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	the date of each amendment(s) adoption: 044 8, 7019	, if other than the
Effe	fective date if applicable: May 1, 2019 (no more than 90 days after amendment file date)	
<u>Note</u> docu	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date cument's effective date on the Department of State's records.	will not be listed as the
Ado	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	n(s)
ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/we adopted by the board of directors.	re
	Dated <u>July 8, 2019</u>	
	(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	D WF CED	

TILED

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JEURETARY OF STATE
ALLIAHASSEF ELEMINE

(Title of person signing)