N1600000 1158

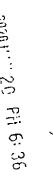
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

	First Coast Pastel S	ociety			
NAME OF CORPORATI	ON:				
	N16000007158				
DOCUMENT NUMBER:					
The enclosed Articles of Art	nendment and fee are sub-	mitted for filing.			
Please return all correspond Janelle Wagoner	lence concerning this matte	er to the following:			
	· · · -	(Name of Contact Perso	n)		
First Coast Pastel S	ociety		•		
		(Firm/ Company)			
2058 Beach Avenue	•				
		(Address)			
Atlantic Beach, Flori	ida, 32233				
 · · · · · · · · · · · · · · · · · ·		(City/ State and Zip Cod	ic)		
janellewagoner@me	e.com				
	E-mail address: (to be used	for future annual report	notification	n)	
For further information con	cerning this matter, please	call:			
Jacqueline Piontek			04-471		
		at			
	(Name of Contact Person			(Daytime Telephone Number)	
Enclosed is a check for the	following amount made pa	ayable to the Florida Dep	artment of	State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Cenifi Cenifi	cate of Status ed Copy ional Copy is	
Mailing A			Address		
	ent Section		dment Secti		
Division (P.O. Box	of Corporations 6327		on of Corpo Centre of Ta		
	_ -				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

20201111 20 PH 6: 36

FIRST COAST PASTEL SOCIETY, INC.

(Name of Corporation as currently filed with the FI N16000007158	orida Dept. of Sta	nte)	
(Document	t Number of Corpo	oration (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Flor	rida Not For Profit Corporation adopts	s the following
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.			p." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2058 Beach Avenue	
		c Beach, Fl. 32233	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)		2058 Beach Avenue	
(muning andress MAT BE AT OST OTTICE BO		: Beach, Fl. 32233	
D. If amending the registered agent and/or register	red office address	in Florida, enter the name of the	
new registered agent and/or the new registered	onice aggress: lanelle Wagone	er	
Name of New Registered Agent:	2058 Beach Av		
-	(Florida street address)		
<u>New Registered Office Address:</u> A	Atlantic Beach	32 , Florida	2233
_	(City)	(Zip Code,)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with	and accept the obligations of the positi	on.
	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	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add X Remove	<u>P</u>	Carron Welund	1203 Air Park Loop North Green Cove Springs, Fl. 32043
2) Change Add	<u>P</u>	Cynthia Pierson	96 Amistad Dr. St. Augustine, Fl. 32086
Remove 3)	<u>T</u>	Jacqueline Piontek	306 Marsh Point Circle St. Augustine, Fl. 32080
4) Change Add	<u>T</u>	Janelle Wagoner	2058 Beach Ave. Atlantic Beach, Fl. 32233
Remove 5) Change Add Remove	S	Letitia Hubbard	172 Poinsettia St. Atlantic Beach, Fl. 32233
6) Change Add			
(attach additional sheet	g additional Artic ts, if necessary).	cles, enter change(s) here: (Be specific)	
NA			

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The date of each amendment(s) adoption:	if other than the
July 1, 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, the document's effective date on the Department of State's records.	this date will not be listed as the
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
May 7, 2020
Dated
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)
Carron Wedlund
(Typed or printed name of person signing)
President

(Title of person signing)