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COVER LETTER

TO: Amendment Section Division of Corporations

PANHANDLE ASSOCIATION OF CONTROL PANHANDLE PANHANDLE ASSOCIATION OF CONTROL PANHANDLE P	ODE ENFORCEMENT
N16000010001 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	g.
CECILIA P JAMES	
(Name of Contact	t Person)
PANHANDLE ASSOCIATION OF CODE ENFORCEMENT	
(Firm/ Compa	any)
840 W 11TH STREET	
(Address))
PANAMA CITY, FL 32401	
(City/ State and Zi	lip Code)
PAOCE.code2016@gmail.com	2.5 2.5 2.5
E-mail address: (to be used for future annual i	report notification)
For further information concerning this matter, please call:	report notification)
CECILIA P JAMES	0,00 240-02,00
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florid	(Area Code) (Daytime Telephone Number). da Department of State:
S35 Filing Fee	Fee & ☐\$52.50 Filing Fee Certificate of Status

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

DANTHANITAL	C 4 C C /	ጉም፣ ል ነገር እነ	OF COINE	ENFORCEMENT

(Name of Corporation as currently filed with the Flo N16000010001	rida Dept. of State)	
	Number of Corporation (if known)	
(Document I	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the	: following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co." "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp."	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_
		_
D. M	3 65 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	_
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		
None of New Books and America		. 0
Name of New Registered Agent:		-3.5
	(Florida street address)	
New Registered Office Address:	Tiorna sover numerosy	
	Florida	٠.
	, Florida (City) (Zip Code)	
		-71
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. It	stered Agent: am familiar with and accept the obligations of the position.	ند
	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 D V Mike John S SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>s</u>	SUZANNE KOGOT	840 W 11TH STREET PANAMA CITY, FL 32401
 X Remove 2) Change Add 	<u>S</u>	BRANDON IRWIN	840 W 11TH STREET PANAMA CITY, FL 32401
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change Add			TALL STORY
Remove 6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
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e date of each amendment(see this document was signed.) adoption:	, if other than the
	PRIL 11, 2023	
in applicable.	(no more than 90 days after amendment	file date)
ote: If the date inserted in this	block does not meet the applicable statutory filing Department of State's records.	g requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Datad	7/27/2023
Dated	
Signatu	re
	(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)
	CECILIA P JAMES
	(Typed or printed name of person signing)

(Title of person signing)

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