N16639

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> SECRETARY OF STATE TALLAHASSEE, FLORID!

2010 FEB 26 AH 9:

Amend

TB

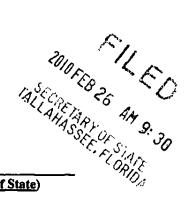
MAR - 2 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _	TREASURE COA	ST CRIM	ME STOF	PPERS	
DOCUMENT NUMBER:	N16639				
The enclosed Articles of Amenda	ent and fee are submi	tted for fili	ng.		•
Please return all correspondence of	oncerning this matter	to the follo	wing:		
KENNETH WILSON (REGISTERED AGENT)					
	(Name of Co				
TREASURE COAST CRIME STOPPERS					
(Firm/ Company)					
250 NW CO	UNTRY CLUB DR	IVE			
	(Address)				
PORT ST. LUCIE, FL. 34986					
	(City/ State a	nd Zip Co	de)		······································
WILSONK@STLUCIESHERIFF.COM					
E-mail	address: (to be used for	or future ar	nual repo	rt notification	n)
For further information concerning	g this matter, please ca	ilt:			
KENNETH WILSON		_at (<u>_772</u>		871-5360	
(Name of Contact F	erson)	(A	rea Code	& Daytime 1	Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:					
Certificat	Filing Fee & e of Status	Certified (Addition enclosed)	al copy is)		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ā D C 2	lifton Build	Section Corporations ling ive Center Cir	rcle

Articles of Amendment to Articles of Incorporation of



of		SERVE	
TREASURE COAST CRIME STOPPERS,	INC.	SEE OF SIAL	
(Name of Corporation as currently filed with	the Florida Dept. of St	tate)	
N16639			
(Document Number of Corpora	tion (if known)		
rsuant to the provisions of section 617.1006, Florida Statute e following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For I</i>	Profit Corporation adop	
If amending name, enter the new name of the corporati	on:		
N/A			
ne new name must be distinguishable and contain the word breviation "Corp." or " Inc." <u>"Company" or "Co." may no</u>	d "corporation" or "inc ot be used in the name.	corporated" or the	
Enter new principal office address, if applicable:	policable: N/A		
rincipal office address <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
If amending the registered agent and/or registered office adnew registered agent and/or the new registered office ad	dress:	ter the name of the	
Name of New Registered Agent:	N/A	_	
New Registered Office Address: (Flor	ida street address)	_	
		, Florida	
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing Registered Agent. I am it is in a provinted to the interest of the appointment as registered agent. I am it is in a provinted to the interest of t		pt the obligations of th	
	N/A		
Signature of New	Registered Agent, if cho	anging	

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)

<u>Title</u>	<u>Name</u>		Address	Type of Action
	N/A	<u></u>		
	N/A	 .		Add Remove
	N/A	-		☐ Add ☐ Remove
(attach ad	ling or adding additional Additional Additional Sheets, if necessary CLE VII- MANAGEMEN). (Be specific,	nange(s) here:	
THE AFF	AIRS OF THE CORPC	RATION ARE	TO BE MANAGE	D BY THE BOARD OF
DIRECT	ORS, WHICH INCLUDE	ES THE PRES	SIDENT, VICE PR	ESIDENT, SECRETARY
	JRER, IMMEDIATE PA			
BOARD				
	·	· · · · · · · · · · · · · · · · · · ·	·	
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		<u>-</u>	 	
				
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		······································		

The date of each amendment(s	s) adoption: _	MAY 12, 2009
Effective date if applicable:	N/A	(date of adoption is required)
	(no mo	ore than 90 days after amendment file date)
Adoption of Amendment(s)	(C	HECK ONE)
XEX The amendment(s) was/were was/were sufficient for appro		e members and the number of votes cast for the amendment(s)
There are no members or me adopted by the board of direct		to vote on the amendment(s). The amendment(s) was/were
Dated		/22 /2010
Signature		ace Bellantin
have	not been selec	r vice chairman of the board, president or other officer-if directors eted, by an incorporator — if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)
		BELLANTONI yped or printed name of person signing)
	PRESIDE	ENT, BOARD OF DIRECTORS (Title of person signing)

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