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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sarasota Manatee Community Response Team, In
DOCUMENT NUMBER: <u>N2000003876</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Grace Movan (Name of Contact Person)
Savasota Manatee Community Response Team Inc.
211 S. Tamiami Trail
OSprey, FL 34229 (City/ State and Zip Code)
Sarasotamanatee crt agnal. Com E-mail address: (to be used for fugure annual report notification)
For further information concerning this matter, please call:
Grace Moran at 941-840-1485 (Area Code) (Daytime Telephone Numbers)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee

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

Sarasota Manatee (Name of Corporation as currently filed with the F	Community Response Team	Inc.
11.0	orida Dept. 01 State)	
N2000003876		
(Docume)	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid imendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts the	e following
A. If amending name, enter the new name of the c	corporation:	
		There
name must be distinguishable and contain the word "	'corporation" or "incorporated" or the abbreviation "Corp."	The new or "Inc "
"Company" or "Co." may not be used in the name.	corporation of theoryporated of the above visition corp.	
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD		
Trincipal Office address most be A STREET AD	<u>DRLSS</u>)	
		_
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	OX)	
		-
	ered office address in Florida, enter the name of the	
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:		
_	(Florida street address)	<u></u>
New Registered Office Address:	i maie secel cameessy	₿ 1
		- T
	, Florida	~
	(City) (Zip Code)	-
New Registered Agent's Signature, if changing Re	gistered Agent:	市工
	I am familiar with and accept the obligations of the position.	<i>~</i> >
		127
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	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.
nd 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
eld. 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 Si	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove  3 ) Remove  Add Remove			
4) Change Add			
Remove			
5) Change Add		<u> </u>	
Remove			
6) Change Add	<del></del>		
Remove			
E. If amending or addin (attach additional shee	ng additional Arti	icles, enter change(s) here: (Be specific)	

Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for Such purposes, the making of distributions to organizations. that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue code, or corresponding section of.

any future federal tax code.
Upon dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501 (c)(3) of the Internal Revenue Code, or Corresponding Section of any future federal tax code, or shall be distributed to the federal government, or to a State or local government, for a public purpose
The date of each amendment(s) adoption: 5112020, if other than the date this document was signed.
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 as the document's effective date on the Department of State's records.
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.
Dated 5/8/2020
Signature All All All All All All All All All Al
(Typed or printed name of person signing)
Presiden (Title of person signing)