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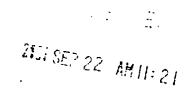
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 13, 2021

YATE CUTLIFF PO BOX 15095 ST PETERSBURG, FL 33733

SUBJECT: PINELLAS REMEMBERS COMMUNITY REMEMBRANCE

PROJECT COALITION, INC. Ref. Number: N20000011502

We have received your document for PINELLAS REMEMBERS COMMUNITY REMEMBRANCE PROJECT COALITION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

On the officer/director page of the amendment please check only one type of action for Danny and JC. For the name Julian Riley please check the type of action change, add or remove.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley Regulatory Specialist II

Letter Number: 821A00022006

Yate Catliff 727 - 415 - 8819

Articles of Amendment to Articles of Incorporation of

Pinellas Remembers Community Remembrance Project Coalition, Inc.

N20000011502			
(Document Num	ber of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida</i>	Not For Profit Corporation adopts t	he following
A. If amending name, enter the new name of the corpora N/A	ntion:		The new
name must he distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ation" or "incorp	porated" or the abbreviation "Corp.	 :
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS	<u>. </u>	(f)	2021
			ISEP 2
C. Enter new mailing address, if applicable:	N 17 N	대한 공2	· ~ 1
(Mailing address MAY BE A POST OFFICE BOX)	N/A ————————————————————————————————————	<u> </u>	- 2 -
			8: 08
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	_	lorida, enter the name of the	
N/A Name of New Registered Agent:			
Same of New Registered Agent.			
New Registered Office Address:		(Florida street address)	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent. I am fo	amiliar with and	accept the obligations of the position	1.
	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 De V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change X Add	<u>C</u>	Danny E. White	3135 1st Ave N Suite 15536 St Petersburg FL 33730
Remove			
2) Change Add	<u>C</u>	J.C. Pritchett, II	3135 1st Ave N Suite 15536 St Petersburg FL 33730
Remove 3)	<u>s</u>	Christie L. Hardwick	3135 1st Ave N Suite 15536 St Petersburg FL 33730
4) Change Add	<u>T</u>	Julian Riley	3135 1st Ave N Suite 15536 St Petersburg FL 33730
Remove			
5) Change Add	<u>C</u>	Jacqueline Hubbard	
x Remove			
6) Change Add	<u>C</u>	Gwendolyn Reese	
x Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
N/A			

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
(1) Change Add	<u>S</u>	Christina Williams	
xRemove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee	ig addition	onal Articles, enter change(s) here: essary). (Be specific)	
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The date of each amendment(s) addate this document was signed.	option: July 6, 2021				, if other than the
	. 2021			- 110	
	(no more than 90 d	ays after amendme	ent file date)		
<u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	k does not meet the appl artment of State's record	icable statutory fil ls.	ing requirements,	this date will not	be listed as the

(CHECK ONE)

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

Adoption of Amendment(s)

was/were sufficient for approval.

Dated	August 29, 2021
Dateti	0.11.
Signatur	· Table (ulas)
	(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)
	Yate' Cutliff
	(Typed or printed name of person signing)

(Title of person signing)