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(Ad	dress)	· ,
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

	uitable Policy. Inc.		.	
N21000001573 DOCUMENT NUMBER:			-	
The enclosed Articles of Amendment and fee a	re submitted for filing.			
Please return all correspondence concerning thi	s matter to the followir	ıg:		
Roxanne Fixsen				
	(Name of Conta	et Person)		
Center for Equitable Policy, Inc.				
	(Firm/ Com	ipany)		
4801 5th Street North				
	(Addres	ss)		
St Petersburg, FL 33703				
· · · · · · · · · · · · · · · · · · ·	(City/ State and	Zip Code)		
roxanne.fixsen@outlook.com				
E-mail address: (to b	e used for future annua	al report notificat	(on)	
For further information concerning this matter,	please call:			
Roxanne Fixsen		727 at	409-2145	
(Name of Contact	Person)		(Daytime Telephone Numb	ег)
Enclosed is a check for the following amount m	nade payable to the Flo	rida Department (of State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of S		y Cer opy is Cer (Ad	.50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	

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	of Amendment	
Articles of	to f incorporation	
	of 200 ///	.55
Center for Equitable Policy, Inc.	of Incorporation of 2024 AFR 9 For of Corporation (if known)	50
Name of Corporation as currently filed with the Florida Dep	pt. of State)	2/4 .
N21000001573		ر : ^{دا (۱}
(Document Number	of Corporation (if known)	: ` ,
Pursuant to the provisions of section 617,1006, Florida Statutes, imendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following	
. If amending name, enter the new name of the corporation	<u>n:</u>	
Policy Partners, Inc.	The new	
name must be distinguishable and contain the word "corporation" (Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA .	
If amending the registered agent and/or registered office new registered agent and/or the new registered office add		
Name of New Registered Agent:		
Now Project of Office Address	(Florida street address)	
<u>New Registered Office Address:</u> N k		
	. Florida	
lew Registered Agent's Signature, if changing Registered Agentereby accept the appointment as registered agent. I am famil	gent:	
1 / K	nature 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 munner. 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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	Title Name	Address
1) Change Add		
Remove	/	
2) Change Add	 /	
Remove 3) Remove Add Remove		
4) Change Add		
Remove		····
5) Change Add Remove		
6) Change Add		
Remove		
F If amending or additional she	ing additional Articles, enter change(s) here: ets, if necessary). (Be specific)	
NA		
		

Na	
	*
<i>'</i>	
	
	
	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	If other than the
Effective date if applicable: (no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.	

adopted by the boa	04/11/2024
Dated	U-W11/2024
Signature	Noxa Fire
	By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by the fiduciary
	other court appointed fiduciary by that fiduciary)
	Roxanne Fixsen
	Roxanne Fixsen