1/10/22, 4:39 PM

Division of Corporations

Floridal Department of State Division of Corporations Biccooling Illing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BRYTEBRIDGE CONSULTING, LLC

Account Number : I20200000117 Phone : (407)278-1552 Fax Number : (407)857-9309

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

SCUALIANY OF STATE FALLAHASSEE, FLORIDA

ATCHARD

COR AMND/RESTATE/CORRECT OR O/D RESIGN LIVE TAMPA BAY, INC.

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S. PRATHER

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section				8
Division of Corporations	5		٠.	
`\				
NAME OF CORPORATIO	LIVE Tampa Bay, In	c .		
DOCUMENT NUMBER: _	N21000014500			
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.		
Please return all corresponder	nce concerning this matte	r to the following:		
Bemetra Simmons				
	i	(Name of Contact	Person)	
LIVE Tampa Bay, Inc.				
		(Firm/ Compa	ny)	
4300 W Cypress St #875				
		(Address)		
Tampa, FL 33607				
		(City/ State and Zi	p Code)	
		,	•	
bsimmons@tampabay.org				
E-	mail address: (to be used	for future annual i	eport notification	1)
For further information conce	erning this matter, please	call:		
Bemetra Simmons			813 at	872-2804
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ellowing amount made pa	yable to the Florid	a Department of	State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & 1 Certificate of Status	\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif y is Certif	D Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Ac		<u> </u>	Street Address	
Amendmen			Amendment Secti	
	Corporations		Division of Corpo	
P.O. Box 6			The Centre of T	
l allana\$sec	, FL 32314	4	CHLD IN. MONTOC	Street, Suite 810

Tallahassee, FL 32303

	Articles of Amendmen to Articles of Incorporation	,	TALLYAN SEEF, FLORID
LIVE Tampa Bay, Inc.			SEN DE LA
Name of Corporation as currently filed with the	e Florida Dept. of State)		可以至
N21000014500			— 6. 3 — 6. 3
(Docum	nent Number of Corporation	ı (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:		Not For Profit Corporation adopts the folio	wing
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the word		The orated" or the abbreviation "Corp." or "Ir	new nc. "
"Company" or "Co." may not be used in the name	<u>c</u> .		
B. Enter new principal office address, if applica			
(Principal office address <u>MUST BEA STREETA</u>	DDRESS)		
C. Enter new mailing address, if applicable: Mailing address MAYBEA POST OFFICE	<i>BQX</i>)		
D. If amending the registered agent and/or registered agent and/or the new register		orida, enter the name of the	_
Name of New Registered Agent:			
	4300 W Cypress St #875	(Sheet Assess Advers	
New Registered Office Address:		(Florida street address)	
	Tampa	Storida 33607	
	(City)	, Florida	
New Registered Agent's Signature, if Changing I hereby accept the appointment as registered agen			
		Simmona	
	Signature of New 1	Registered Agent, if changing	

To: +18506176381 Page: 5 of 7 2022-01-10 21:49:36 GMT 14075985443 From: Andrea Orteg

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Nar</u>	<u>me</u>	<u>Addres</u> s
l) Change Add				
Remove				
2) Change Add		<u> </u>		
Remove 3) Change Add Remove		_	<u> </u>	
4) Change Add		_		
Remove 5/ Change Add				
Remove 6) Change Add		- —-		
E. If amending or addin (attach additional shee				
	<u></u> _			•

	
	
	
The date of each amendment(s) adoption:date this document was signed.	01/07/2022, if other than the
Effective date if applicable:	
(no m	pore than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
☐ The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the amendment(s)

2022-01-10 21:49:36 GMT

14075985443

From: Andrea Orte

To: +18506176381

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SELVICIARY OF STATE ALLAHASSEE, FLORIDA