N22 U000001546

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TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

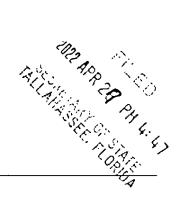
Concerned Citizens of Pinecrost & Beyond I've NAME OF CORPORATION: N 22 00000 1546 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Laura McNaughton (Name of Contact Person) (Firm/ Company) 13401 SW 74 avenue (Address) PINEUREST MORIDA 33156
(City/ State and Zip Code) CCP 33156 @ gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: McNaughten at 786 747 7506

(Name of Contact Person) (Area Code) (Daytime Telephone Number) haura Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Flor	rida Dept. of State)
N 22-000	DOO 1546
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	
Concerned Citizens of	PINECREST INC: The new reportation or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	NESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ν/Δ
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	fice address:
Name of New Registered Agent:	NIA
New Registered Office Address:	(Florida street address) N/A , Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. It	am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/d	irector 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 Si	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add		NA	
Remove		. Ja	
2) Change Add		NA	
Remove 3) Change Add		NIA	
Remove 4) Change Add		N/A	
Remove 5) Change Add		NIA	
Remove 6) Change Add		MA	
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	
	N/A		

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The data of such amondment(s) adopti		2/10/2		if other than the
The date of each amendment(s) adoption date this document was signed.	on:		_	, if other than the
Effective date if applicable:		ays after amendment	01 1 1	
	(no more than 90 de	ays after amendment	file datej	
Note: If the date inserted in this block do document's effective date on the Department.			requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members an	d the number of vote	s cast for the amendment(s)	

	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 All) >>				
Signature (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)					
	Laura Mc Naughton				
	(Typed or printed name of person signing)				
	DIRRETOK , PRESIDENT				
	(Title of person signing)				

FILED 2022 APR 2Q PH 4: 47 35 SACLARY OF STATE